

# Mariner's Medical Companion

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# THE MARINER'S MEDICAL COMPANION

SYMPTOMS, DISEASES, TREATMENT

WITH PLAIN AND SIMPLE DIRECTIONS FOR THE USE  
OF THE MEDICINES AND APPLIANCES IN

NELSON'S  
MEDICINE CHEST

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COMPILED BY

E. W. PIPER, M. D.

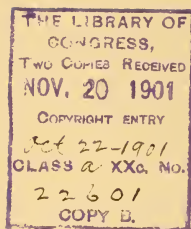
PHYSICIAN TO SEVENTY-FIVE SHIP CORPORATIONS

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## P R E F A C E

**T**O my friends and clients, Ship Masters, this little compendium is dedicated. After many years of practice among you, meeting with the inadequate and crude methods in use for the relief of the sick while at sea, and in remote ports where physicians are inaccessible, I have tried to think of a means of assisting you in your treatment of the ill. In collecting the material for this book I have not depended on my own experience alone, but have gathered largely from the most eminent medical teachers such information as I thought would be the most useful.

With your ever sympathetic natures, you are often worried and annoyed as to the proper way to proceed to help the poor sick fellows who are left to your mercy for medical help ; and as so much depends upon the ability to recognize and classify a case of illness, and on the selection of the proper remedy, in offering this little book and medicine case, I have endeavored to put it all in such a simple and helpful shape that you will be able to administer your remedies skillfully and restore to health the fellow-sufferers, who, without such care, would probably go into slow decline, if not premature death. I hope by use of this little work that you may be the means of saving many a life, or at least of staying the progress of disease until you meet with a physician to whom you can turn over your case.

E. W. PIPER, M. D.





# The Mariner's Medical Companion

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## FEVER.

**Definition.**—Fever is caused by a disarrangement of the sympathetic nervous system ; it is characterized by a marked rise in temperature, quickened circulation and disordered secretions ; it is due to some alteration of the bodily functions and is evidence of a diseased condition.

In order to determine the severity of the disease, a fever thermometer is used. In normal health the temperature is ninety-eight and a half, and to ascertain the amount of fever, the thermometer is placed in the patient's mouth, or in the armpit, and allowed to remain for three to five minutes ; if the mercury rises

- 99° to 100° the fever is slight
- 100° to 101° the fever is moderate
- 102° to 103° the fever is high
- 104° to 105° the fever is intense.

**Causes.**—Excessive fatigue, physical or mental, exposure to heat, excess of eating or drinking, direct infection, and inflammation following wounds or bruises.

**Symptoms.**—A feeling of lassitude, chilly sensations down the back, or a decided chill, followed by a sudden rise in temperature, quick pulse, headache, thirst, coated tongue and scanty and high colored urine. When the temperature rises above 103° there is apt to be more or less delirium.

**Treatment.**—If due to over-eating or drinking, remove the cause as soon as possible by use of an emetic or a mild laxative. Ascertain, if possible, the cause of the fever. If due to some infection, the symptoms must be studied, and the conditions treated as they arise according to their severity and the nature of the disease. If the cause cannot be at once determined, give a Calomel

tablet (1-4 gr.) every hour until the bowels move. Sponge the body with cold water and put the patient on light diet, avoiding all solid food. If the temperature does not fall, give a tablet of Aconite Comp. No. 2 every hour until the skin becomes moist; as the fever subsides, lengthen the interval to one every three hours, until the temperature becomes normal.

## INTERMITTENT FEVER.

(FEVER AND AGUE, CHILLS AND FEVER, MALARIAL FEVER, SWAMP FEVER)

**Definition.**—A fever occurring at regular intervals, with the following three well-defined stages—the chill, the fever, and the sweat.

**Cause.**—Exposure to malarial influence; presence in the blood of a specific germ.

**Symptoms.**—General malaise, lassitude, yawning, headache, muscular soreness, creeping chills; as the chill increases, the fingers and lips become blue, the teeth chatter, the patient suffers great thirst, and may have attacks of nausea and vomiting; the chill may last a short time or continue for several hours. This condition is followed by an attack of fever; the body gradually becomes warmer, the skin flushed, the pains in the limbs disappear, but the headache increases in severity, the pulse is full and rapid and the temperature high, 105°–106° F. The duration of the fever varies from one hour to ten or twelve, and is succeeded by the sweating stage, which may continue from one to four hours. The perspiration first appears in drops on the forehead and gradually extends over the whole body, and is at times very profuse. With the appearance of the sweat the fever lessens, the headache and muscular soreness pass away, and gradually the patient falls into a sleep. Attacks occur with regularity; they may come every day, or every other day, sometimes with three days intermission, or a week may intervene. In dumb ague the symptoms are not so clearly separated.

**Treatment.**—Open the bowels with Epsom or Rochelle Salt. While the attack is on little can be done to cut it short. During the chill, the patient should be put to bed, well covered with woollen blankets, given hot drinks, and have hot water bottles

placed to the feet ; as the fever comes on, the blankets should be gradually removed, cool drinks substituted for hot ones, and the body sponged with alcohol and water.

Recurrence of attack may be prevented by taking a Calomel and Ipecac tablet every two hours for three doses, followed by a dose of Castor Oil and by large doses of Quinine. Note the time that the chill first appeared, and give ten to fifteen grains of Quinine with a hot drink one hour before the expected seizure. Between the attacks give one or two Quinine and Capsicum tablets every two or three hours, and continue this treatment for at least a week after the last chill.

Keep up the patient's strength with nourishing food, and as a tonic to prevent relapse give one Blaud's Pill Comp. No. 4 after each meal.

## TYPHOID FEVER.

(GASTRIC FEVER, ENTERIC FEVER, ABDOMINAL FEVER)

**Definition.**—An acute infection, due to special poison, having the following well defined characteristics: Languor, dizziness, headache, nosebleed, abdominal tenderness, with presence of much gas in the bowels; diarrhoea, the discharge resembling pea soup, often mixed with blood; tongue at first red, becoming dry, brown and cracked; a peculiar eruption upon the abdomen, high fever with stupor and delirium, extreme prostration and slow recovery.

The peculiarity of the fever is the gradual rise of temperature. On the first day it is normal in the morning, the evening  $100\frac{1}{2}^{\circ}$ ; the second day, morning temperate,  $99\frac{1}{2}^{\circ}$ , evening  $101\frac{1}{2}^{\circ}$ , and so on.

Favorable indications are constipation, or slight diarrhoea, low temperature and slight delirium.

Disease usually lasts about four weeks.

**Cause.**—A specific germ, introduced into the system through infected drinking water or contaminated food.

**Symptoms.**—For several days, and sometimes for two or three weeks before the fever appears, there is loss of appetite, great lassitude, dizziness, headache, usually over the forehead; the sleep is disturbed and digestion disordered, nosebleed frequently occurs. The patient complains of great muscular weakness, a sensation of chilliness or decided chill, which is followed by fever.

The disease presents a steady progress, and the time of infection is usually dated from the first attack of fever.

First week—The patient at this time has a hot, dry skin, rapid pulse, coated tongue, nausea, diarrhoea and headache; there is more or less stupor. On the seventh day (sometimes the ninth) five to twenty reddish spots (which disappear on pressure), resembling flea bites, make their appearance on the abdomen, chest or back. The abdomen is very tender, distended, and on pressure emits a gurgling sound.

Second week—The symptoms are the same, but more pronounced; short cough, peculiar contraction of the muscles; the coating disappears from the tongue, which becomes dry; crusts appear on the lips and teeth.

Third week—The fever changes from continuous to remitting, but the evening temperature keeps high. Great prostration; involuntary stools.

Fourth week—The fever is less severe. The morning temperature becomes almost normal. The stupor disappears, the diarrhoea ceases and the patient slowly improves, though very weak and thin.

Treatment.—Patient should at once be put to bed in a cool, well ventilated, quiet room, and 1-20 gr. Calomel tablet given every two hours for three days. No solid food should be allowed, but liquid diet every two hours. The mouth should be washed with the antiseptic solution (made by dissolving an Antiseptic Pastile, Seiler's formula, in two ounces of water). Stimulants (whisky) should be given in tablespoonful doses every two hours. The stools should be disinfected by Corrosive Sublimate solution (made by dissolving one tablet in a pint of water). To reduce fever, use cold baths or sponge the body frequently.

As the bowels are the seat of infection in typhoid fever, an intestinal antiseptic should be used, this prevents the multiplication of the typhoid germs, relieves the wind in the bowels, and checks the diarrhoea. Best results follow the use of Beta Naphtol Comp. tablets, taken one or two, every two or three hours, until the symptoms improve. (See Disinfection, page 13.)

## TYPHUS FEVER.

(CONTAGIOUS FEVER, SHIP FEVER, JAIL FEVER)

**Definition.**—An acute epidemic, contagious disease, coming on very suddenly. Great prostration; on the fifth to seventh day a peculiar measly eruption appearing over all the body except the face. Peculiar sickening odor. Disease usually lasts about two weeks.

**Cause.**—Foul air, filth, exposure to specific contagion.

**Symptoms.**—Sudden chill followed by high fever, headache and delirium, and great prostration. On the fifth to the seventh day an eruption appears on the body, resembling measles, but is never seen on the face. The bowels are usually constipated; the face has a dusky color and glazed appearance, the eyes bloodshot, the body emits a disagreeable odor.

It may be told from typhoid fever by the character of the eruption, the continued high fever and the constipation of the bowels.

**Treatment.**—Give Quinine in ten grain doses three or four times a day. Use the cold pack or bath to reduce temperature. Correct the constipation with one Cascara Comp. No. 3 tablet given every four hours until the bowels move. Support the strength with two tablespoonfuls of brandy every two to four hours.

As typhus fever is extremely contagious the patient should be isolated and the urine and stools disinfected by Corrosive Sublimate solution. The room and clothing should also be treated in the same manner to prevent the spread of contagion. (See page 13.)

## YELLOW FEVER.

(SAILOR'S FEVER, BLACK VOMIT, MEDITERRANEAN FEVER)

**Definition.**—An acute infection, with high fever, yellow skin and black vomit.

**Cause.**—A specific poison introduced into the system. It is prevalent in hot countries and is killed by frost.

**Symptoms.**—The attack usually comes on during the night with a chill and pains in the head, limbs and large joints, followed

by fever which soon reaches  $104^{\circ}$ , eyes brilliant, flushed face, coated tongue, and irritable stomach. This condition lasts for thirty-six hours to three or four days, when all symptoms disappear with recovery of the patient. If, however, within the next twenty-four hours the symptoms return, in a more aggravated form, with yellowness of the skin, the characteristic black vomit, and hemorrhage, with feeble pulse, cold skin, and irregular respiration, death is very likely to occur. The mind remains clear to the end.

**Treatment.**—Patient must be put at once to bed, in a well ventilated room and given large doses of Quinine. The bowels should be opened with Calomel in 20-grain doses, followed in two hours by two ounces of Castor Oil.

Brandy or whisky should be given in doses of a tablespoonful every two or three hours to support strength. (See page 13.)

## SCARLET FEVER.

(SCARLATINA.)

**Definition.**—An acute, self-limited disease, with high fever, and a bright scarlet rash appearing first upon neck and chest, and soon spreading over the entire body; the mouth and throat are more or less inflamed. On the sixth or eighth day the skin commences to peel, and continues for ten days or two weeks, or until the exfoliation of the entire body has occurred. The disease is both contagious and infectious.

**Cause.**—A specific germ, present chiefly in the cast-off skin.

**Symptoms.**—The disease begins with a sudden chill and vomiting, sore throat, and high fever with rapid pulse. In children it frequently shows itself by a convulsion, or a sudden attack of vomiting with prostration. The tongue is at first coated with a thick, yellowish fur, except at the tips and edges; on about the third day exfoliation occurs, leaving the surface raw and red and presenting the characteristic strawberry tongue. The rash makes its appearance in about twenty-four hours upon the neck and chest, then upon the cheeks, at first a pale red, but soon becoming brighter, and spreading over the entire body until the whole surface has an intense scarlet hue. The patient suffers from headache, is restless, and, in the more severe cases, delirious. The



appetite is absent, the bowels disturbed, either constipated or loose. The distinguishing points are the high fever ( $104^{\circ}$  to  $105^{\circ}$  F.), rapid pulse (110 to 140), sore throat, scarlet tongue and bright scarlet rash over the entire body, which soon fades, and is followed by peeling of the skin.

**Treatment.**—Scarlet fever frequently occurs in a very mild form, the fever lasting only two or three days, but these cases, if not properly cared for, are often followed by acute Bright's disease. When of the malignant type, scarlet fever is a disease greatly to be dreaded. It is frequently followed by diphtheria and other complications.

The patient should be put to bed in a well-ventilated room away from every one except his attendant, he should be given light nourishing food and cooling drinks. Give a tablet of Calomel, 1-10 grain, every hour until the bowels move freely. For the fever, a tablet of Aconite Comp. No. 2 every two hours until the temperature is controlled. The skin should be anointed with Carbolated Vaseline (5 grains to the ounce) twice a day, and the nose and mouth kept clean by the use of Antiseptic Pastiles (Seiler's formula), one dissolved in an ounce of water and used freely with an atomizer. Sheets should be hung about the room and kept wet with Solution of Carbolic Acid, a teaspoonful to a pint of water.

For sore throat, spray freely with the antiseptic solution (Seiler's), and wrap a piece of flannel wet in cold water around the neck, covering this with a dry flannel.

As a tonic, give one tablet of Iron, Quinine and Strychnine No. 2 three times a day, with small doses of wine, milk-punch or egg-nog to keep up the patient's strength. No matter how mild the attack, the patient should be confined to a room where the temperature is uniform until the shedding of the skin has stopped, and should be carefully protected against drafts, as sudden chilling of the surface is liable to cause acute inflammation of the kidneys.

After recovery the room in which the patient has been confined should be thoroughly disinfected by burning Sulphur as described under Disinfection, page 13.

## MEASLES.

**Definition.**—An acute epidemic and contagious disease characterized by fever, catarrh of nose, bronchial inflammation and a crimson rash first seen upon face about the fourth day, and soon spreading over the body. Rarely followed by a second attack.

**Symptoms.**—It comes gradually with chill and fever rising to  $101^{\circ}$  or  $102^{\circ}$ ; soreness in the muscles, headache and considerable catarrh of the nose and throat. On the fourth day an eruption of a crimson rash on the face, soon spreading over the body. The fever is higher— $104^{\circ}$  or  $105^{\circ}$ . About the ninth day eruption fades and in general patient is better. A peeling of the skin occurs. Cough and irritation of the throat may last some time.

**Treatment.**—Keep the patient in a moderately warm, well ventilated room; avoid drafts; give light diet and sponge the body frequently to keep the skin active and to reduce the fever. The bowels should be regulated. If fever is high, give two tablets of Aconite Comp. No. 2 every hour for six doses, then every three hours until fever abates.

The majority of cases of measles require very little medicine, good care and nursing being the most important factors. The patient must not be exposed to change of temperature, or pneumonia or other diseases of the lungs are liable to set in. These may be guarded against by wearing an oilskin jacket, covering the entire chest. (See Disinfection, page 13.)

## BERI BERI.

**Definition.**—A disease affecting the absorbent glands, characterized by great weakness, degeneration of muscular tissue, dropsy, pain, numbness and paralysis of the lower extremities.

**Cause.**—Supposed to be due to change in the blood. Nervous symptoms caused by malnutrition of spinal cord.

**Symptoms.**—A puffy swelling, at first of the toes, extending gradually to the ankles and legs and progressing, without treatment, to the thighs and abdomen, filling all the tissues with water as high up as the waist, causing utter helplessness of the lower extremities, while the upper part of the body is normal and perfectly under control, and painless.

The disease is infectious and communicates itself to others who are in the immediate vicinity of the person so afflicted.



**Treatment.**—The disease requires very active treatment, which should be commenced at once. Tablet—Potass. Nitrate, Cream Tartar. One every two hours.

Galvanic current applied with the positive pole to small of the back and the negative pole to the soles of the feet, ranging from 50 to 250 milli-amperes will succeed in curing the disease effectually in ten or twelve applications, but the current has to be applied thoroughly. The swelling and dropsy will all disappear gradually under this specific treatment. As the galvanic electricity is applied at first there is not a particle of feeling in the feet, but as the swelling and dropsy disappear, sensation and pain are appreciable by the patient, and he cannot stand so strong a current.

After the acute attack has passed the general health of the patient should be carefully looked after. As a blood and nerve tonic give Bland's Pill Comp. No. 4, one after each meal, and if bowels are constipated, one or two Cascara Comp. No. 3 tablets at night. (See Disinfection, page 13.)

## DISINFECTION.

### (CONTAGIOUS DISEASES)

Apart from the general rule of absolute cleanliness regarding closets, sinks, and the sleeping quarters of the men, which should be frequently and regularly scrubbed, the use of some disinfectant is necessary. Bichloride of Mercury or Carbolic Acid answers the purpose better than any other agents.

In using the Bichloride dissolve a tablet in water in the proportion of one to a pint of water. Carbolic Acid should be diluted with water in the proportion of four ounces to a pailful of water. Either of these solutions, if used at all, must be freely applied to the floors, walls, and all parts of the place to be disinfected, or no good will result. The proper application of a disinfectant destroys the germs of disease, and in this way prevents it from spreading.

**CONTAGIOUS DISEASES.**—Spread of contagious diseases may be prevented by special attention being given to ventilation and cleanliness, and the proper use of disinfectants. In cholera, typhoid fever, and probably dysentery, consumption, yellow and typhus fevers, the stools are infectious; the expectoration from consumptives and from those suffering with pneumonia; the discharges from diphtheria, as well as vomited matter in cholera,

scarlet and yellow fever, carry the germs of the disease, and must be carefully disinfected. In all diseases where there are discharges from the bowels, the patient should use a vessel or bedpan containing sufficient of the bichloride or copperas solution (see list of remedies) to cover the expected discharge.

Diseases such as smallpox, measles, or scarlet fever are contagious, that is, in order to contract the disease one must come in contact with the diseased person, although it may occasionally be carried by the nurse or attendant. Bedclothing or wearing apparel should be disinfected by immersing it in bichloride solution, then plunging it in boiling water, where it should be allowed to remain at least half an hour.

To disinfect a room after the patient has been removed, first see that all apertures, doors, windows, and portholes are tightly closed, then place some sulphur (about one pound to every 300 cubic feet of air) in a tin pan, place this over a tin bucket partly filled with water, pour a little alcohol over the sulphur, and apply a match. The alcohol will ignite at first and set fire to the sulphur. Close the room and let it remain shut up for twenty-four hours, at the end of that time it may be opened and used, as all danger of contagion has passed away. The sulphur, in burning, gives off sulphurous acid gas, which penetrates every part of the room and destroys the germs.

## COLD IN THE HEAD.

(NASAL CATARRH, INFLUENZA, GRIP)

**Definition.**—An active inflammation of the inside of the nose, fullness of the head and running of the nostrils.

**Causes.**—Standing or sitting in damp places; exposure to drafts; wet feet.

**Symptoms.**—A cold in the head is generally preceded by a languid feeling, with more or less headache, dryness in the nose and a desire to sneeze. Shortly there is a watery discharge which is constantly dropping from the nose, followed by a spell of sneezing. Blowing the nose relieves the thickened membrane for a little while, the fullness returning in a few minutes. The inside of the nose is red and swollen, and later the discharge gets thicker and sometimes becomes offensive. When the attack is ending,

hard crusts generally form within the nostrils. Mild cases run about a week ; severe cases, longer.

**Treatment.**—Coryza Tablets. For fresh cold, give two tablets at first dose, followed by one every hour until cold is broken up.

When in addition to the cold in the head there is cough and more or less bronchial inflammation, as shown by fever and pain in the chest, discontinue the Coryza Tablets and give one tablet of Cough Persistent with Heroin every three or four hours until relieved, with a hot drink on going to bed.

Much relief will be experienced by spraying the nose and back of the throat, every three or four hours, with an antiseptic solution, made by dissolving one of the Antiseptic tablets (Seiler's formula) in two ounces of water.

In attacks of grip and influenza give the Coryza tablets as directed above, and if much muscular soreness and pain in the head are present, give in addition a tablet of Salol and Phenacetine with two grains of Quinine every three or four hours.

## BRONCHITIS.

(COLD ON THE CHEST)

**Definition.**—An inflammation of the bronchial tubes with fever and hard dry cough.

**Cause.**—Exposure to sudden changes of temperature, or to dampness, wet, or irritating dust or vapors.

**Symptoms.**—An attack of acute bronchitis begins with chilly sensations, pains in the limbs, coated tongue, loss of appetite, general feeling of weariness, hurried breathing, fever, rapid pulse, and pain and soreness over the sternum or breastbone. The cough is hard, dry and painful at first, the expectoration scanty and of a frothy white nature with salty taste. As the cough becomes looser the expectoration increases in quantity and becomes of a yellow or greenish-yellow color and mattery consistence.

Bronchitis may become chronic, and the cough, without other serious constitutional disturbance, be present more or less constantly.

**Treatment.**—Give two five-grain Dover Powder tablets with five grains of Quinine so as to induce perspiration. Open the

bowels with two Comp. Cathartic pills. After the cough becomes easier give one or two tablets of Cough Persistent with Heroin every three or four hours until expectoration is established and the painful symptoms all disappear. In chronic bronchitis give the Cough Persistent with Heroin, one every three or four hours until relieved.

## CROUPOUS PNEUMONIA.

(LUNG FEVER)

**Definition.**—An acute inflammation of the lungs, causing an engorgement of the air cells, accompanied by fever, cough, expectoration and loss of strength.

**Causes.**—Neglect to care for the body when exposed to wet and dampness, dissipation, cooling the body too suddenly when perspiring; impoverished system.

**Symptoms.**—Ushered in by chill and fever, followed by headache, heaviness and pain over right lung; expectoration growing thick and profuse. Unless the disease becomes complicated or the patient is extremely run down in health, this form of lung inflammation will run its course in a fortnight.

**Treatment.**—Hot fomentations, poulticing and cupping the chest. Internally, Aconite tablet No. 2 every hour until fever abates. For cough, give one or two Cough Persistent with Heroin tablets every two hours.

## CATARRHAL PNEUMONIA.

(LOBULAR PNEUMONIA)

**Definition.**—An inflammation spreading over the entire lung structure, rapidly closing the air cells, followed by fever, shortness of breath, cough, expectoration and weakness.

**Causes.**—A weakened system through debilitating diseases, exposure; overwork, mental and physical.

**Symptoms.**—Closely resembles croupous pneumonia. Fever high at commencement, pain felt over the entire chest; breathing short and quick, due to pain in effort to breathe; nostrils open wide on taking in the air, the entire body covered with profuse sweat, great quantity of pussy expectoration, arteries throb, pulse

quick and full. A noisy rattle can be heard in the throat and chest due to the air trying to force its way through the accumulated lung secretions. In the young and aged the nail tips turn blue. This form of pneumonia is very fatal.

**Treatment.**—Internally, for fever, one tablet Aconite Comp. No. 2 every hour as needed. As the cough loosens give one tablet Cough Persistent with Heroin every three hours, and one Quinine tablet, 2 grains, every three hours. Give nutritious diet—milk, eggs, broths, and stimulants as required.

## ASTHMA.

**Definition.**—A spasmodic contraction of the bronchial muscles with short breath, wheezing, sense of suffocation, hard dry cough, anxious countenance.

**Causes.**—Disturbances of the nervous system, often hereditary. Also due to inhalation of irritating substances, such as dust from grain, ipecac, turpentine; climate is often a cause, also acute attacks of indigestion.

**Symptoms.**—The attack may be sudden, which is often the case in the first instance, or it may be preceded by a cold in the head, a sense of tightness of the chest muscles, dyspepsia and irritable bladder. The patient experiences a sense of suffocation, the breath is short and gasping, with loud wheezing. The face is flushed, lips pallid. The attack lasts from one to three hours, and prevents patient from lying down. Asthma is rarely fatal unless complicated with heart disease.

**Treatment.**—To stop the attack give a tablet of Morphine Comp. No. 4. Inhalation of a few drops of Amyl Nitrite will often give prompt relief. To prevent recurrence, give an Anti-asthmatic tablet every three or four hours until relieved. If complication of heart disease exists, give Cardiac Asthma, one tablet every three hours until better.

To ward off an approaching attack drink black coffee freely.

## INDIGESTION, ACUTE.

(GASTRIC CATARRH, BILIOUS FEVER)

**Definition.**—An inflammation of the lining of the stomach.

**Causes.**—Improper food, eating quickly without sufficient

mastication, drinking too much ice water with meals, abuse of alcoholic liquors, sudden changes of temperature.

**Symptoms.**—Coated tongue, bad taste in the mouth, offensive breath, loss of appetite, and at times disgust for food, dizziness, light fever, heartburn, nausea, and pain after eating; in more advanced cases, vomiting soon after meals, first of undigested food and later of mucus, gastric juice and bile. The urine is scanty and deposits a heavy sediment on standing.

**Treatment.**—If the attack is acute, and the patient is vomiting, give one or two glasses of hot water to thoroughly cleanse the stomach. If in pain apply flannel dipped in hot water across the stomach until relieved. Give a tablet of Calomel Comp. No. 3 every hour for ten doses, and follow by a saline cathartic, either Epsom or Rochelle salt. Diet should be light and nourishing, but do not insist on patient eating until the appetite returns.

To prevent recurrence, care should be used in regard to diet and a tonic given to improve digestion. Antidyspeptic No. 2 is the best remedy; give one tablet, with water, half an hour before meals, and repeat the dose half an hour after eating.

## CONSTIPATION.

**Definition.**—A loss of function of the bowels, due to inaction of the muscular lining, or to insufficient secretion of bile. Passages are small, dry, and occur at irregular intervals.

**Causes.**—Improper food, dyspepsia, derangement of the liver, neglect on part of patient.

**Symptoms.**—Small, dry, hard stools, occasioning great distress, sometimes occurring every day, but usually at intervals of three or four days, and often longer.

On account of the waste products not being removed from the system, the abdomen becomes distended, there is more or less dyspepsia, headache, dizziness, and at times palpitation of the heart on slight exertion.

**Treatment.**—Have a regular time each day for going to stool; drink a glass of water on retiring, and one or more on rising. Care must be given to diet. On retiring take one or two tablets of Cascara Comp. No. 3, and follow by one after breakfast and dinner if they do not operate. Lessen the dose, or lengthen the interval between the doses as the bowels resume their normal



functions. If there is rumbling in the bowels, colicky pains with feeling of band around forehead, give a tablet of Calomel Comp. No. 3 every hour until they operate, and then begin the use of the Cascara tablets as described above.

## COLIC, INTESTINAL.

(GRIPES, CRAMPS, LEAD COLIC)

**Definition.**—Severe cramp-like pains, occurring in the region of the navel, due to spasmodic contraction of the muscles of the intestine.

**Causes.**—Wind in the bowels due to undigested food, fermentation, constipation, derangement of the liver, lead poisoning.

**Symptoms.**—Violent cramps in region of navel, occurring at intervals, pain not constant. Nausea and vomiting are often present. Pressure on abdomen usually affords some relief. Attacks vary from a few minutes to several hours.

**Treatment.**—If pain is very severe give a Chlorodyne tablet every hour for three doses unless earlier relieved. If patient is constipated give a Turpentine injection (tablespoonful of turpentine to a quart of hot Castile Soapsuds) and apply hot applications or mustard to the bowels. After the pain has been relieved give a laxative, Castor Oil, Epsom Salt, or one Comp. Cathartic tablet every two hours until bowels operate.

## DIARRHŒA.

**Definition.**—A derangement of the small intestines, with colicky pains and frequent loose movements.

**Causes.**—Undigested food in the bowels, changes of weather, impure water, tainted food, sudden shock, or excess of bile.

**Symptoms.**—Acute attacks due to disturbance of the digestive functions, commence with colic and bloated abdomen, which is shortly followed by frequent movements of the bowels. The stools are loose, offensive, usually brown at first, becoming lighter after four or five evacuations. When due to excess of bile, the stools are green or yellow, and produce a scalding sensation as they are passed. Intestinal diarrhœa is caused by the food not being properly digested. It is passed by the bowels in an almost undigested condition.

Either of the foregoing forms, unless promptly checked, pass into the chronic stage.

**Treatment.**—In acute attacks, if due to overloading the stomach, or to unripe fruit or tainted food, or if diarrhœa is due to the presence of undigested food, give a dose of Castor Oil, and then begin with the Diarrhœa Fermentative tablets and give one or two every two or three hours until relieved. If the case does not respond promptly, give a Beta Naphtol Comp. tablet in connection with the Diarrhœa tablets until the movements are checked.

After the bowels have resumed their normal functions, if pain or flatulence occur after eating, give a tablet of Bismuth Subgallate Comp. No. 2 immediately after meals, and repeat in two hours if necessary.

In chronic cases give a tablet of Intestinal Antiseptic No. 2, with one Corrosive Sublimate 1-60 grain tablet every three or four hours. Increase the interval, and later discontinue the Corrosive Sublimate tablets as the symptoms improve.

## CHOLERA MORBUS.

(SPORADIC CHOLERA, ENGLISH CHOLERA, BILIOUS CHOLERA)

**Definition.**—An acute inflammation of the stomach and bowels, with severe pains, vomiting, purging, cramps in the limbs and great weakness.

**Causes.**—Eating unripe or decayed fruit, the presence of undigested food in the bowels, fermentation of food. Attacks occur in summer following rapid changes in temperature, and are usually very sudden.

**Symptoms.**—Sudden attack of vomiting and diarrhœa, severe cramps in stomach and bowels. Unless checked, the character of the vomit and the discharge from the bowels change, becoming like rice water. The pulse is feeble, the skin cold and clammy, the patient suffers intense thirst, but is rarely able to keep any fluid upon the stomach. Great loss of strength and emaciation occur. In elderly people there is danger of collapse.

**Treatment.**—Give a tablet of Chlorodyne No. 2, and repeat in two hours if symptoms are not improved. Support the strength by small repeated doses of brandy. To relieve thirst give cracked ice, but no other liquids until the vomiting ceases.



Apply mustard to the bowels, and a hot water bag to the feet. After the pain has been relieved, if the diarrhœa continues, give a tablet of Corrosive Sublimate, 1-60 gr., after every movement until the discharge from the bowels becomes normal.

## INFLAMMATION OF THE BOWELS.

(INTESTINAL CATARRH)

**Definition.**—An inflammation of the mucus membranes of the small intestines, with pain, fever, tenderness, and frequent discharges from the bowels.

**Cause.**—Exposure to cold or dampness, excessive heat, undigested food, injury to the abdomen, rupture or inflammation caused by irritating purgatives.

**Symptoms.**—Languor followed by a chill, high fever, pain and tenderness above the navel, which is increased on pressure; nausea, vomiting and diarrhœa. The bowels may at first be constipated, but the discharges soon become loose and watery and resemble "rice water."

It may be told from colic by the constant pain and tenderness on pressure, the presence of fever, vomiting and diarrhœa.

**Treatment.**—Stop all solid food. Rest the bowels by giving light diet, milk and lime water, mutton or chicken broth, with boiled rice. Apply hot linseed poultices to the bowels, and give a Chlorodyne tablet every three hours. If the bowels are constipated they may be moved by an injection of warm water, at least two quarts should be used. After all pain and tenderness have passed away, give a dose of Castor Oil to overcome the constipating effect of the medicine.

## DYSENTERY.

**Definition.**—Inflammation of the mucous membrane of the large intestines, progressing to ulceration, with frequent small, bloody stools, attended with burning pain and great straining in the rectum, and with colicky pains around the navel.

**Cause.**—Epidemic; a disease of the summer and autumn, may be introduced into the system by means of drinking water. Differs from summer diarrhœa in not being caused by errors of diet.

**Symptoms.**—Attack commences with diarrhœa, nausea and vomiting; loss of appetite and slight elevation of temperature. The stools are soft for the first day or two and contain some fæcal matter, when they change in character, becoming greyish or white, and consist of more or less mucus streaked with blood. Pain of a colicky character occurs around the navel; the desire for stool is more frequent, the movements at times occurring hourly, accompanied with great straining. If not properly treated the disease becomes chronic.

**Treatment.**—Give one Dover's Powder tablet, and one Beta Naphtol Comp. tablet, every three hours; with a dose of Castor Oil twice a week. If much pain occurs apply Turpentine stupes frequently to the abdomen. If this treatment does not stop the attack, give in addition a tablet of Corrosive Sublimate, 1-60 grain, every hour or two until the character of the discharge changes, when the interval between the dose may be lengthened. Washing out the rectum with a solution of Carbolic Acid (half teaspoonful well dissolved in half a pint of water and injected with a small syringe) will often lessen the number of stools and reduce the straining. In mild cases the disease may last a week, the patient being very much prostrated and emaciated. In the more severe types such as are seen in the tropics, the duration of the disease is from six to ten weeks with very slow recovery.

All forms of dysentery require careful disinfection of stools, they should be received in a vessel containing some Bichloride Solution, or a solution of Copperas (Iron Sulphate, one pound to a gallon of water). In all cases put the patient to bed if possible, if not, give him the lightest duties possible, as rest is one of the great factors in enabling him to resist the disease.

## INTESTINAL OBSTRUCTION.

**Definition.**—Closing of the intestinal canal, may be either gradual or sudden, caused by accumulation of hardened fæcal matter in the bowels, pressure against the bowel by the growth of a tumor, bursting of the bowel from sudden strain, or from the bowel becoming invaginated, that is, one part slipping over another, as the tip end of the finger of a glove may slip down into the larger portion.

Whatever the cause, pain, nausea, vomiting and constipation occur, and unless relief is afforded final collapse will follow.

**Symptoms.**—Attack may be sudden, or may gradually develop, marked with more or less severe colicky pains with constipation a prominent symptom, which is not relieved by the use of purgatives or injections; the abdomen is distended with a feeling of weight and soreness, nausea and vomiting occur, the pain increases in severity, with great tenderness over the stricture or portion of bowel involved.

The face wears an anxious look, eyes sunken, the skin cold and covered with clammy sweat. Nausea and vomiting occur, the vomit having a fecal odor and consisting of matter from the bowels. These symptoms in a more or less aggravated form may last for a week, when a change for the better occurs and the patient gradually returns to health, or collapse and death take place. As a rule, the longer the case lingers the more hopeful it is. Consult a surgeon if possible.

**Treatment.**—Apply hot Turpentine stupes to the abdomen and give frequent injections into the bowels of a quart of lukewarm water and Castile Soap to which two tablespoonfuls of Olive Oil have been added. Support the strength with stimulants. If the pain is severe give one Morphine Comp. No. 4, and repeat in two or three hours if not relieved.

## JAUNDICE.

**Definition.**—An obstruction of the bile ducts, due to inflammation. The bile becomes absorbed by the blood and stains the skin and whites of the eyes a yellow color. A condition rather than a disease.

**Causes.**—Gall stone; inflammation of the lining of the gall ducts, which becomes thickened and closes the ducts, preventing the flow of bile through the ordinary channels. The bile is absorbed by the liver and finds its way into the blood. The skin and whites of the eyes become yellow, due to the coloring matter of the bile. Jaundice is usually the result of excessive eating or drinking. It often follows a debauch, yet it also occurs from the poisoned state of the blood due to derangement of the liver during malarial fevers, especially those of tropical climates.

**Symptoms.**—Pain and tenderness in the right side over the

liver, coated tongue, looseness of bowels, nausea, and slight fever. The whites of the eyes soon become yellow, and gradually the whole body assumes a yellow color, the skin dry and itchy. The bowels, which were at first loose, become constipated, and the stools white or clay colored; colicky pains in the bowels with a great deal of wind. Slight fever, impaired heart action, urine dark colored and heavily loaded with urates, which deposit on standing.

**Treatment.**—Avoid starchy foods, fats and sugars. While the fever lasts give milk, or nourishing broth. Warm baths will give much relief.

Give one Cascara Comp. No. 3 tablet every four hours until they operate, then one every other night for a week. After the acute attack has passed, to prevent recurrence, take one or two tablets at night to keep the bowels open; lessen or gradually increase the dose as required to produce a natural, easy movement of the bowels, but not to purge.

## RUPTURE.

(HERNIA)

**Definition.**—A protusion of a portion of the bowel through the walls of the abdomen, occurring usually at the navel or the groin.

**Cause.**—Violent exertion, lifting heavy weights, straining at stool, wearing belts that are too tight while lifting heavy loads.

**Symptoms.**—Pain, fulness and heat in the abdomen; a swelling, at first small, which may be detected on standing, and which usually decreases in size or disappears when the patient lies down. Coughing enlarges the swelling, which is often accompanied by constipation, colic and vomiting. If neglected, the walls of the passage through which the bowel escaped are liable to contract and cause the bowel to become strangulated.

**Treatment.**—Place the patient on his back and apply ice to the swelling until the inflammation disappears and then gently press the swelling upwards with the fingers, so as to return the bowel to the abdominal cavity. No attempt should be made to reduce a rupture until the pain and inflammation have subsided. If ice cannot be obtained apply warm applications or put the patient in a hot bath, and keep him there until relaxation occurs,

when the rupture may be reduced by gentle pressure upwards as stated above. Be careful not to use too much force and do not be too hasty; it frequently takes half an hour to accomplish the purpose.

In strangulated hernia, the symptoms are more pronounced, there is more or less pain of a colic-like nature, not relieved by purgatives or enemas, feeling of weight with soreness and distention of the abdomen, nausea, vomiting, the pain becoming severe, the eyes appear sunken, the skin cold and covered with a cold perspiration. Unless relief is afforded death ensues in about a week. The longer the case lingers the greater chance there is of recovery.

Relieve pain by giving Morphine Comp. No 4 tablet, apply ice to bowel and try to reduce the swelling by gentle upward pressure, flood the bowels by means of a fountain syringe with tepid water so as to cause relaxation. If these means fail, a surgeon should be called as soon as possible.

## APPENDICITIS.

**Definition.**—An inflammation of the appendix, a little teat or pouch adjoining the large intestine, situated in the lower right side of the abdomen.

**Causes.**—Presence of some foreign body—hard fæcal matter, grape seed, cherry pit, etc., which sets up a more or less severe inflammation, and may result in perforation of the appendix. May also be caused by a blow or injury, exposure to cold, exhaustion following overwork.

**Symptoms.**—Sensation of weight and heat in lower part of abdomen on the right side, which is tender on deep pressure, rapidly developing in soreness, severe colicky pains, swelling in the right side, nausea and vomiting, bowels are constipated, tongue coated, the tip red. The attack usually begins with a temperature of  $99^{\circ}$  to  $100^{\circ}$ , which, if an abscess is forming, will suddenly jump to  $103^{\circ}$ , accompanied by chilliness and clammy sweats. There is great suffering and prostration, and unless relief is afforded the attack is very liable to end fatally.

**Treatment.**—There are two forms of the disease, the chronic and the acute. The former may return from time to time and not develop sufficiently severe symptoms to demand the services of

the surgeon, but in acute cases the surgeon should be consulted as soon as possible, as delays are often fatal. Meanwhile, give two tablespoonfuls of Castor Oil, or four ounces of Sweet Oil, and repeat in three or four hours until the bowels operate. Apply ice to the seat of pain, or hot applications if no ice can be had. Give the patient an injection into the bowels, made with warm water and soapsuds and two tablespoonfuls of olive oil. If possible, use a fountain syringe and pass a quart or more of fluid into the bowels; repeat this at intervals of two hours. If the pain is very severe, give a Morphine Comp. No. 4 tablet every four hours until relieved.

During the attack the patient should live on a milk diet.

Chronic appendicitis may be greatly relieved by strict attention to diet, avoiding all starchy foods, fermented liquors and foods that are difficult or slow to digest, and consequently liable to produce fermentation. The following medical treatment will give great relief in mild cases: After meals take a tablet of Bismuth Subgallate Comp. No. 2, to be followed in two hours by one Beta Naphthol Comp. tablet; should the bowels become constipated, take two or more Anticonstipation No. 5 tablets at bedtime. This treatment may be continued without any danger for an indefinite time, and usually with the happiest results.

## HEMORRHOIDS.

(PILES)

**Definition.**—A small tumor, or several, which form at the opening of the anus, and which may be situated either inside the bowel or at the outer edge. They may either be “blind” or bleeding.

**Cause.**—Enlargement of the veins of the bowel, straining at stool, disorders of the liver, abuse of purgative medicine.

**Symptoms.**—Itching, burning and swelling around the anus, with soreness and pain, often very severe. In bleeding piles considerable blood is lost at every stool. Often, after severe straining, the pile protrudes from the anus and is caught by contraction of the muscles, and unless returned at once (which may be done by applying some Vaseline and pushing the bowel back with the finger) is liable to cause much suffering. If not done at once the



part becomes inflamed, hot and painful, and before it can be reduced the inflammation must be relieved. Ice is the best remedy for these cases, applied until the swelling and pain are somewhat reduced, then spread some Vaseline on the part and push the pile gently into the rectum with the finger. Do not use too much force, and if the reduction cannot be effected at first apply the ice a second time, and then attempt to return the tumor.

**Treatment.**—Keep the bowels open with one or two tablets of Anticonstipation No. 5 taken at night, and apply Carbolated Vaseline and press the pile back if it comes down, after every stool. Bathe the parts frequently with cold water.

## FISTULA OF THE ANUS.

**Definition.**—A false passage or canal extending from the rectum through the tissues to the surface of the skin.

**Cause.**—Neglected hemorrhoids. Hard fæcal matter remaining too long in the folds of the rectum, may set up an inflammation that will cause an abscess, which breaks, and the pus burrowing through the soft tissues makes a false passage for the escape of gas and other contents of the bowels.

**Symptoms.**—Foul smelling watery discharge from the fistula, pain and itching at the rectum.

**Treatment.**—The best method is an operation which will remove the cause. If this is not practical, bathe the parts frequently with weak Carbolic Acid (a teaspoonful well stirred into a pint of water), dry carefully, and cover parts with Borated Talcum. If the discharge is very offensive, and the above treatment does not relieve it, after washing with the carbolic solution, dust Iodoform on the parts.

Open the bowels by using an injection of warm water daily if possible, or by taking a dose of Castor Oil once or twice a week.

Diet should be nourishing, and if the patient becomes pale or weak, gave a tablet of Bland's Pill Comp. No. 4 after each meal. The disagreeable odor of the discharge may be in a measure controlled by the internal use of a Beta Naphtol Comp. tablet taken every three hours. The external bathing with an antiseptic must be kept up, however.

## ROUND WORMS.

**Definition.**—The round worm is reddish brown and tapers at both ends. The eggs are not destroyed by freezing and are also impervious to high temperature. They will live for years when deposited, and are found in dirty places where many people congregate. The number of worms existing at one time in the intestinal canal varies from one to five hundred. Where there are many they group themselves in bundles or rolls. Occasionally they work their way into the stomach, mouth and nose. They have been found in the liver, causing serious trouble.

**Cause.**—Taken into the system through food and drink.

**Symptoms.**—When the number present is small there are no particular symptoms, but in large numbers the digestion and nervous system are affected. The usual symptoms are colicky pains around the umbilicus (belly button), irregular appetite, occasional vomiting, sometimes diarrhœa, the stools containing mucus mixed with blood; itching of the nose and anus, emaciation, restless nights, grinding of the teeth in sleep, etc. In young girls, from eight to fifteen, they are the cause of hysteria and attacks similar to epilepsy. The only proof of their existence is their presence in the stools or vomited matter.

**Treatment.**—Give patient light diet for a day or two, then two Santonin and Calomel No. 2 tablets at night, followed by a dose of Epsom Salt or Castor Oil the next morning. Fifteen to thirty drops of Turpentine taken in milk is also an excellent remedy.

## THREAD WORMS.

(SEAT WORMS)

**Definition.**—A small worm from one-sixth to half an inch long, resembling a piece of white thread, inhabiting the large intestines and rectum.

**Cause.**—Introduction into the intestines through food.

**Symptoms.**—Intolerable itching at times, often worse at night when warm in bed, frequent desire for stools. The stools usually soft, bad smelling, and coated with slimy mucus in which the worms are often seen.

**Treatment.**—For adults, two Santonin and Calomel No. 2



tablets at night, followed by a dose of Epsom Salt next morning. The itching and irritation of the parts may be relieved by bathing with a solution of Carbolic Acid (five drops to an ounce of water).

## TAPE-WORM.

**Definition.**—A parasite taken in an embryotic form into the system with water or food. It develops after it reaches the intestines, reaching a length of from six to thirty feet. Its form is ribbon-like, and it is made up of segments or joints, which are flat and vary from one-eighth to half an inch in length. Each segment contains both male and female reproductive organs.

**Cause.**—Handling or eating raw meat or fish, or drinking water containing the embryo worm.

**Symptoms.**—Disordered digestion, pain in the abdomen around the navel, itching of the nose and anus, excessive craving for food, which does not seem to nourish the patient; loss of appetite in some cases, great thirst, palpitation of the heart, faintness, cough, shortness of breath and lassitude. The pain often disappears after eating, to make its appearance after a short interval. The most positive symptom is the presence of pieces of the worm in the passages from the bowels.

**Treatment.**—Put patient on light diet (milk, tea and toast) for a few days; give a dose of Castor Oil or Epsom Salt for two mornings, follow this treatment with one-half to one teaspoonful of Oleoresin of Male Fern given fasting, and repeat the dose in two or three hours. About four hours after first dose give some more Castor Oil. One to two ounces of Pumpkin Seeds beaten to a pulp and mixed with water or honey to a paste have also given excellent results. The same precautions as to diet and the use of Cathartics must be observed as mentioned above.

## RHEUMATISM.

A disease affecting the joints or muscles, caused by an altered state of the blood. It may develop, by an inflammation and swelling of the joints, when it is known as "articular" rheumatism, or the muscles alone may be affected, when the term "muscular" rheumatism is applied.

## ARTICULAR RHEUMATISM.

(INFLAMMATORY RHEUMATISM, RHEUMATIC FEVER)

**Definition.**—An inflammation of the joints, coming on suddenly with high fever, great pain, redness, and swelling of the joints. Danger of the heart being affected.

**Causes.**—Heredity, exposure to cold or continued dampness.

**Symptoms.**—A sudden chill, followed by pain, stiffness of the joints and high fever; profuse perspiration; scanty, high colored urine, great thirst, constipation, and loss of appetite. The pain is often severe enough to prevent sleep. One or more joints may be attacked; the affected part becomes red, swollen, tender upon pressure, and causes much pain if moved.

**Treatment.**—In an acute attack put the patient to bed, cover well with blankets, avoid all drafts, but allow ventilation. Give one or two Rheumatism tablets every three or four hours until the bowels operate freely, then one every four hours until relieved. For pains in the joints dissolve a Liniment tablet in four ounces of alcohol and rub the affected parts gently. Relief may also be obtained by applying flannel cloths that have been dipped in water as hot as can be borne, and about one-quarter teaspoonful of turpentine sprinkled over them. These should be renewed as they cool.

## MUSCULAR RHEUMATISM.

**Definition.**—Muscular rheumatism differs from articular or joint rheumatism in that the muscles only are affected. It may be either acute or chronic. There is pain, soreness and stiffness of the muscles, but without danger of any complication of heart disease.

**Cause.**—Exposure to dampness or cold, improper food, constipation.

**Symptoms.**—As a rule the first attack is sudden, with pain and stiffness in the muscles. The affected parts are tender to the touch, and every movement causes pain. There is absence of fever. Only certain of the muscles may be affected. When the muscles of the neck are involved, wry neck or stiff neck results. The muscles of the chest are often attacked, and pain is experienced on breathing or coughing. This is often mistaken for

pleurisy, but may be distinguished by absence of fever, the breathing and pulse being both normal. A third form known as lumbago attacks the muscles of the small of the back, this comes on very suddenly, is extremely painful, and at times prevents the patient from moving without the most excruciating pains.

**Treatment.**—For stiff neck, rub the affected parts with a liniment made by dissolving one Liniment tablet in four ounces alcohol. Cover the part with flannel.

For muscular pains in the chest, apply a flaxseed poultice and give a Salol and Phenacetine tablet with two grains of Quinine every two hours until relieved.

For lumbago, use the liniment and give the Salol and Phenacetine and Quinine as directed above.

In both articular and muscular rheumatism, after the acute attacks have passed, give a tablet of Sodium Salicylate, 5 grains, after each meal and at bedtime. Support the strength with Blaud's Pill Comp. No. 4, and keep the bowels regular with Cascara Comp. No. 3 taken as required at bedtime.

## NEURALGIA.

**Definition.**—A disease affecting the nerves due to disordered nutrition; acute shooting pains, local in character. One or more sets of nerves may be involved.

**Causes.**—Debility, malaria, decayed teeth, disordered state of the blood, mental worry, exposure to dampness, cold.

**Symptoms.**—Sharp shooting pains following the course of the nerves, and affecting various parts of the body. It may attack the face, causing severe spasmodic pains of a darting or stabbing character in the left cheek and extending over the eyebrow; or the arm, hand and shoulder may be involved, with burning pain, spasmodic in character, accompanied with a sense of weakness or numbness. At times swelling occurs and the skin becomes dry and shiny. What is called intercostal neuralgia is often mistaken by the patient for a sudden attack of pleurisy, especially if he has a cold at the same time. It may be distinguished, however, by absence of cough and fever. Pains are of the same general character, and occur between the ribs and around the nipple. Frequently associated with an eruption upon the skin.

Lumbo-abdominal neuralgia is another form of neuralgia occurring in the small of the back, and following the nerves across the stomach and shooting down the inside of the thigh.

Sciatica results when the sciatic nerve is affected. The pain here originates in the upper part of the hip and extends down the hip and thigh. It may also involve the calf of the leg, ankle and heel. Attacks are very painful and may last from a few hours to several days. If long continued, due to a diseased condition of the nerves, wasting of the limb is liable to occur.

**Treatment.**—Hot water applications externally. Internally in mild attacks a tablet of Salol and Phenacetine every two or three hours. In severe cases, Neuralgia tablets (Dr. Brown-Sequard) one-half strength, given every three or four hours until relieved. In sciatica, two Sciatica tablets every three or four hours, with one Salol and Phenacetine. Use the liniment also as directed on page 31. To prevent attacks look after the nourishment of patient. After the acute attack give a tonic, Bland's Pill Comp. No. 4, after meals.

## NEURALGIA OF THE HEART.

(ANGINA PECTORIS)

**Definition.**—An acute affection of the heart, manifested by sharp, shooting pains around the heart and extending into the left shoulder and down the left arm. Feeble circulation, cold sweat, great oppression and fear of death. In nervous patients attacks of "false angina" are often encountered, with distention of the abdomen, flatulence, great restlessness, irregular pulse, and pains about the heart. These attacks are usually hysterical in character, and, though alarming, are never dangerous.

**Causes.**—True Angina. Often hereditary, diseased valves of the heart, excessive use of tobacco.

False Angina—Debility, nervous prostration, delayed digestion with fermentation of food.

**Symptoms.**—Irregular attacks of a sudden and violent character. The patient starts with a cry of horror and is unable to lie down, the forehead is covered with a cold, clammy sweat, the breathing is quickened, the heart's action slow and weak, there is great oppression and anxiety, severe darting pains in and around

the heart, extending to the left shoulder and arm. Nausea and vomiting occur, and the secretion from the kidneys is largely increased. Death frequently takes place during an attack.

**Treatment.**—Nitroglycerine tablet, 1-100 grain, every two or three hours until relieved. After the attack give a Heart Stimulant tablet three or four times a day, or as required. Keep up the strength with one Iron, Quinine and Strychnine No. 2 tablet three or four times a day.

The patient should be carefully watched, and everything which tends to cause excitement should be avoided.

## PALPITATION OF THE HEART.

(IRRITABLE HEART)

**Definition.**—A disturbance of the heart manifested by marked rapidity and irregularity of the heart's action.

**Causes.**—Dyspepsia, excessive use of tobacco, tea, coffee, or alcohol; over-exertion, grief, fear.

**Symptoms.**—Sudden feeling of oppression in the chest, usually with pain; rapid and irregular beating of the heart; the thumping of the heart can be plainly felt, and is often noticeable through the patient's clothing. A sense of choking and smothering in the throat, which prevents the sufferer from lying down. The patient experiences great anxiety, dizziness, faintness, and fear of sudden death. Attacks vary in severity and duration, lasting at times from a few minutes to several hours. The disorder is not dangerous, and patients soon recover if properly treated.

**Treatment.**—Remove the cause as soon as possible. Give a Heart Stimulant tablet three or four times a day until relieved. If patient is debilitated give a tablet of Iron, Quinine and Strychnine No. 2 three or four times a day. Application of cold to the heart will often lessen the paroxysm, and at times wearing a Belladonna plaster over the heart will afford great relief.

## DIABETES.

**Definition.**—A chronic disease, manifested by large increase in the quantity of urine passed. There are two varieties. One where the urine shows a constant presence of grape sugar, the

other where the urinary secretion may be very great, but no sugar is present.

**Cause.**—Diseases of the nervous system. Mental shocks, heredity, excessive eating of farinaceous foods, and the habitual drinking of malt liquors to excess, which give rise to disorders of the liver and kidneys. Most common in males.

**Symptoms.**—*Diabetes mellitus* is the name given to the disease, where in addition to the large quantity of urine passed, grape sugar is constantly present. The symptoms are as follows: Inability to retain urine, which is passed at short intervals in large quantities. May amount to three or four gallons in the twenty-four hours. Color pale, clear, readily ferments if kept, contains varying amounts of sugar. Great thirst; mouth is dry and parched; tongue red, tender and cracked; breath has at times a peculiar sweetish odor. Appetite capricious, may be abnormal or absent. Stomach and bowels are disordered. Great weakness in the limbs, with pain, soreness and loss of flesh. Eyesight poor, skin hard and dry, mental condition irritable, face has a careworn, anxious look.

*Diabetes insipidus* presents many symptoms similar to those described in the above disease, but differs from it by the absence of sugar in the urine.

**Treatment.**—No sugar or starchy foods can be allowed, such as potatoes, pease, beans, rice, farina, bananas, bread, etc. Diet should consist of animal food, such as meat, poultry or fish. Tea, coffee, or cocoa may be permitted in moderate quantity without sugar. Milk, if it can be secured, is an excellent food. Flannel should be worn next to the body, and warm baths taken two or three times a week to keep the skin active. After meals give a tablet of Potass. Arsenitis, 1-50 grain, with one Sodium Salicylate 5 grains, and continue treatment as long as patient shows sign of improvement. As a tonic give one Iron, Quinine and Strychnine No. 2 tablet after meals.

By attention to diet and use of the above remedies, marked improvement will result, but cure is extremely doubtful.

If the patient chafes under the deprivation of sugar, Saccharin may be used in its place.



## EPILEPSY.

(EPILEPTIC FITS)

**Definition.**—A disease of the brain, manifested by sudden loss of consciousness and convulsive action of the muscles.

**Causes.**—Inherited tendency, disturbance of the brain by pressure of thickened membrane, syphilis, sudden fright, over-work or worry.

**Symptoms.**—The attacks come on very suddenly at irregular intervals, and vary greatly in their severity. The patient falls, utters a peculiar cry, and becomes unconscious. The face is pale and the body rigid; soon convulsive movements of the muscles occur, followed by a stupor which may last for several hours. The mind is a complete blank during the attack.

**Treatment.**—Loosen the clothing about the body. Place a cork between the back teeth, so as to prevent patient biting the tongue. Little can be done while the fit lasts; although alarming to the spectator, there is rarely any serious danger to the patient during the attack. To prevent recurrence give a Sedative tablet with half a glass of water, after meals and at bedtime. Look after the general health. As a tonic to build up the patient and prevent attacks, give Bland's Pill No. 4, one after meals. To relieve constipation, one or two Cascara Comp. No. 3 tablets may be given at bedtime.

## APOPLEXY.

(CEREBRAL HEMORRHAGE—A PARALYTIC STROKE)

**Definition.**—A sudden suspension of consciousness and voluntary motion, caused by the rupture of a blood-vessel in the head, the escape of blood causing pressure upon the brain.

**Cause.**—Disease of the blood-vessels, excess of eating or drinking, Bright's-disease, gout; hereditary.

**Symptoms.**—Attacks occur suddenly or they may develop gradually with headache, vertigo, numbness of the extremities, occasional periods of deafness, dimness of vision, confusion of ideas and marked debility of mental powers.

The attack begins with vomiting and complete relaxation of the muscular system, face flushed, pulse slow and full, the blood-vessels of the head throbbing, the breathing is loud and labored,

the skin covered with profuse perspiration, the eyes bloodshot and glassy. Loss of consciousness may be either partial or complete. Temperature at first below normal, but rises within the first twenty-four hours to 100°-101° F. In mild cases the reaction begins in one-half to three hours. If a state of insensibility lasts more than twenty-four hours, death is usually the outcome of the attack.

**Treatment.**—Loosen the clothing, raise the head, apply ice or cold water to the head and put the feet in a mustard foot-bath, or apply mustard plasters to the soles of the feet and calves of the legs. Give an injection of two tablespoonfuls of Sweet Oil and a teaspoonful of Spirits of Turpentine. After the patient regains consciousness give a dose of Epsom Salt. All stimulants should be forbidden and only a light diet allowed. Patient should have complete rest and quiet.

## DELIRIUM TREMENS.

**Definition.**—A peculiar exhausted condition of the nervous system, the result of excessive intoxication with alcoholic liquids,

**Symptoms.**—Tremor of the limbs, loss of sleep, irritability. hallucinations; the patient talks incessantly and imagines that he sees various repulsive objects, snakes, toads, etc., causing great terror. This excitement is followed by great depression, clammy skin, feeble pulse and loss of muscular strength.

**Treatment.**—Open the bowels with a good dose of Epsom Salt. Give one Sedative tablet with water, and repeat every two hours until the patient falls asleep. Keep up the strength with beef tea or broth, and allow a small quantity of stimulant daily, carefully watching its effect. The patient should be kept under observation as he may attempt suicide.

## CHOREA.

(SAINT VITUS' DANCE)

**Definition.**—A distressing, uncontrollable movement of the muscles.

**Causes.**—Diseases of the nerve centres, shock to the nervous system, as fright; exposure; rheumatism is a frequent cause.



**Symptoms.**—In most cases the start is gradual, the patient appearing to be making faces by twisting the mouth and other muscles. Jerking of the arms and hands in attempting to take anything. The legs and feet are so disabled by these movements as to make walking uncertain. In severe cases speech is impaired, and the patient is unable to feed himself or hold anything in his hands.

**Treatment.**—Three tablets of Potass. Arsenitis, 1-50 grain, three times a day after meals, increasing by one tablet night and morning until the symptoms are controlled, when the dose should be gradually reduced. If pain in the stomach occurs, discontinue the medicine for a few days. Diet should be light and nourishing, the bowels kept regular, and in aggravated cases the patient should be put to bed in a darkened room and kept quiet. If pale and weak, give an Iron, Quinine and Strychnine No. 2 with the other tablets. Each case requires special treatment. Many are cured by a course of electricity.

## ERYSIPELAS.

(THE ROSE, ST. ANTHONY'S FIRE)

**Definition.**—An acute inflammation of the skin, soon extending in severe cases to the deeper tissues; marked by fever, a peculiar, rapidly spreading eruption, with swelling of the tissues, which present a tense, shiny appearance.

**Cause.**—Specific infection.

**Symptoms.**—Sudden chill, followed by fever which soon reaches  $104^{\circ}$  or  $105^{\circ}$ ; coated tongue, vomiting and often diarrhoea. Delirium is frequent in those who use alcohol, and resembles delirium tremens. The eruption soon follows the fever, beginning as red spots, which rapidly run together and spread. A sense of heat and tightness and tingling is caused by the great swelling (œdema), which presents a shiny appearance. The swelling often closes the eyes. After five or six days the eruption begins to pass away, leaving the parts tender, with peeling of the skin. Sometimes it will extend to the brain and lower part of the throat, making it dangerous; also dangerous when it attacks drunkards.

**Treatment.**—Mild cases require little treatment. Patient should be isolated, put on a nourishing diet, and given two or

more Cascara Comp. No. 3 tablets at night to keep bowels open. Apply Carbolated Vaseline to the affected parts to reduce the inflammation. For severe cases, dissolve eight tablets of Lead and Opium Wash in one pint of boiling water, and apply as hot as possible.

Support the strength with beef tea and stimulants, and give a tablet of Iron, Quinine and Strychnine No. 2 every three hours. If the fever is high, give a tablet of Aconite Comp. No. 2 every two hours until the fever subsides.

## BOILS.

**Definition.**—An inflammation of the skin and underlying tissue, liable to occur on any part of the body, but rarely on the sole of the foot or palm of the hand. All periods of life are susceptible to attacks.

**Causes.**—Causes are at times hard to define, but generally their formation is due to disordered digestion, improper working of the liver, diseased and inactive kidneys, general debility, or the result of local friction, bruises, or undue pressure.

**Symptoms.**—Boils commence with a small, hard, red pimple and develop to the size of a small grape. They may come singly or in groups. The pain at first is of a smarting, burning character, but as the pus accumulates, it becomes throbbing and very severe. The skin becomes drawn and tight, dark red and sensitive. Finally, at the apex, a small, yellow spot appears, showing where it is going to open. If there are a number of boils, the entire body is affected more or less by fever, loss of appetite, bad taste in the mouth, headache, chilliness and great discomfort. They usually last from four to eight days.

**Treatment.**—Poultice freely and make a good incision with a knife to let the contents flow freely. The throbbing that accompanies them can often be allayed by the use of a strong solution of Carbolic Acid and Glycerine painted over the surface. Lead and Opium Wash, made by dissolving eight tablets in a pint of water, will give relief. Internally, give a purgative (Epsom or Rochelle Salt), and follow by a tablet of Calcium Sulphide, 1-2 grain, and one Orthodox tablet three times a day, with water, after meals. Keep the skin in healthy condition by bathing frequently.

## ABSCCESS.

**Definition.**—A hard, painful swelling gradually growing larger, until the swollen tissue softens and breaks, with discharge of matter.

**Cause.**—A blow or strain.

**Symptoms.**—Great pain confined to one spot, skin drawn, with more or less swelling and redness, the part throbs as the matter forms, and the swelling grows larger until it finally bursts.

**Treatment.**—Hot flaxseed poultices, applied frequently. If pain is severe apply hot Lead and Opium Wash. Lancing or puncturing with a clean needle will save much time, allowing the matter to escape. Continue the poultice until no more matter is discharged, then keep the wound covered with Carbulated Vaseline until it heals.

## SWOLLEN FACE.

(DUE TO DECAYED TEETH)

Swelling of the gum and face due to a decayed tooth may be relieved by thrusting a small lancet or a large needle into the gum.

Neglect of the teeth will often cause swelling of the gum and face due to the formation of an abscess at the root of the tooth. If allowed to proceed the swelling and pain increase as the pus forms, and if, as is commonly done, hot applications be applied to the face, there is danger of bringing the pus to the surface of the skin, resulting in an ugly wound which, when healed, leaves quite a deep hole in the face.

In cases of this kind, the tooth, if decayed and cannot be saved, should be drawn at once; but if for any reason this cannot be done, the gum should be punctured near the tooth with a large clean needle or small lancet. The opening must be made well up into the abscess so as to allow the escape of the matter; the mouth should then be rinsed with water as hot as can be borne, after which the Antiseptic Pastiles (Seiler's Formula—one in two ounces of water) should be used freely as a mouth wash until all the inflammation subsides. Occasionally it may be necessary to lance the gum a second time, but if the abscess is well opened the first time this will not be required.

## ENLARGED VEINS.

(VARICOSE VEINS)

**Definition.**—Dilation of the veins due to a weakened muscular condition of the blood vessels.

**Causes.**—Tight garters, standing constantly, predisposition.

**Symptoms.**—Severe pains in the veins, which appear much enlarged, distended and knotted, frequently the skin breaks and bleeding occurs, the wound healing slowly and often developing into a slow-healing ulcer.

Varicocele is a painful enlargement of the veins of the scrotum, often due to self-abuse. Piles are caused by enlarged veins in the rectum.

**Treatment.**—Remove all tight bands about the affected part. If the varicose veins are on the leg the patient should stand as little as possible, and should wear an elastic stocking or a wide bandage to support the blood vessels. For varicocele, dissolve eight Lead and Opium Wash tablets in one pint of water, and apply on a soft cloth. Patient should wear a suspensory bandage to support the testicles.

Care should be given to the general health, and the bowels kept open with an occasional dose of Cascara Comp. No. 3 at night. In case of severe bleeding the same general rules apply as given under Bleeding, page 44.

## VENEREAL DISEASES.

Three distinct affections are included in the name venereal. They all arise in the majority of instances from impure sexual connections. They may all exist and be contracted at the same time.

### GONORRHŒA.

**Definition.**—It is an inflammation of the mucus membrane of the urethra (pipe), caused by contact with poisoned virus. It is a local disease. However, it can, and does by the inflammation, run into the bladder and from there into the kidneys. In consequence of personal carelessness it may attack the anus, nose or eyes, frequently destroying the sight.

Long, narrow foreskin helps to contract the disease by retain-

ing the virus in its folds. Circumcision for cleanliness and as a preventive is to be encouraged.

**Symptoms.**—They are divided into three stages. The first stage is a sort of tingling or smarting along the passage, especially at the end of the organ, and a feeling of weight in the penis. Shortly after this the mouth of the tube becomes red and pouting, glued with a whitish discharge. The head of the penis is swollen, and when passing urine there is more or less burning or scalding. In squeezing the penis a little mucus passes out which discolors the linen. These symptoms last from one to two days. The discharge is now quite abundant, often as much as one-half ounce in twenty-four hours; thick, light yellow color, often turning greenish. The whole penis is swollen and painful. The head is very red and congested. The passing of urine causes great pain, and the stream is much smaller and squirts in different directions. When the inflammation is at its height the pain may extend to other parts. These symptoms last for several weeks, gradually declining until cured, but if there is any irregularity of habit, or the case is poorly treated, it will run into a chronic condition called gleet, which is obstinate to treat and discouraging to the patient.

Chordee is very common, and is generally the source of a great deal of distress. It is never absent during the height of the inflammation. It is always more severe at night when the patient becomes warm in bed, causing sleeplessness and excessive pain.

Cystitis is another complication. It is caused by an extension of the inflammation from the urethra (pipe) to the bladder. It is disagreeable and painful. There is a constant desire to void the urine.

Epididymitis is a swelling and inflammation of the testes, which often swell to great size, accompanied by great pain and mental distress. It is the result of cold or irritating injections.

Bubo is an occasional consequence of gonorrhœa, but as a rule does not suppurate. However, it is very painful.

Stricture of the urethra (pipe) owing to the protracted inflammation of the membrane is more liable to be caused than any other injury.

**Treatment.**—Internal and external.

**INTERNAL.**—Tablet Salol and Copaiba Comp. One or two three times a day.

EXTERNAL.—Tablet Potass. Permanganate, one grain. Dissolve one tablet in four ounces of water and inject three times daily. Syringe should have a long nozzle, be well oiled, and hold two ounces. Urine should be voided before using syringe. Paint the penis along the canal with Tincture Iodine diluted with three parts of Alcohol morning and night. Bathing for cleanliness is important.

### CHANCROID.

Chancroid is a disease which resembles a chancre, but differs from it in being a local contagious venereal ulcer. The ulcer as a rule first makes its appearance on the penis. The sore is flat, uneven, coated with a grayish or dirty drab colored deposit. The edges are overhanging and more or less ragged. If the ulcer is on the head of the penis, the edges are steep, ragged and undermined. The nature of a chancroid is to spread. It throws off an abundance of purulent fluid, highly inoculable, giving rise often to a number of sores, during the progress of the disease. The chancroid is followed in a large number of cases by buboes, being usually limited to one of the glands in the groin which gradually becomes inflamed and swollen, and eventually turn into an ugly ulcer. Like the original ulcer the matter running from this is inoculable.

The system takes little or no notice of a chancroid, except when previously in a debilitated condition; then there may be some fever due to other complications. The pain from a chancroid is very little unless the sore is very large.

Chancroid does not run a regular course. It acts considerably like a common boil; one day it looks as if it were getting well and the next day it has taken just the opposite course. Simple ulcers, abrasions, or excoriations are liable to appear and may be mistaken for chancroid. They may result from a great variety of causes: rubbing of the trousers, uncleanness, etc. However, such ulcers are superficial and do not extend any depth, although they may spread. The matter that comes from them is thin and watery and they are usually surrounded with considerable inflammation, which is seldom found in a chancroid. The most important feature is that they readily disappear with cleanliness and treatment.

Treatment.—Internal and external.



INTERNAL.—Give one Orthodox tablet three times a day after meals with water.

EXTERNAL.—Add two Blackwash tablets to a half pint of water and apply on lint or soft linen. Shake the bottle before applying.

## SYPHILIS.

The term Syphilis is applied to a disease commencing in the genital organs in the form of a sore of a specific character, passing into the glands of the groin and finally the muscles, cartilage, bones, and the entire system. These different parts do not all suffer at one and the same time. The poison seems to lie there for future injury.

In the first instance the poison is limited to the genital organs and glands of the groin. After lingering there for six or seven weeks, the skin and mouth begin to suffer, and still later, from six to eighteen months, the bones, cartilage, muscles, etc., are attacked. In this manner three distinct groups of syphilis exist, known respectively as Primary, Secondary and Tertiary—the first, second, and third stages.

The initial lesion or primary chancre can be deposited on any part of the body. The penis, however, is the most likely part; it has been discovered on the legs, anus, tongue, nose, fingers and arms.

The period of incubation, or the time for contracting the poison until it shows, varies from two to three weeks.

There is, at times, a very considerable difference in the size and appearance of the sore. That depends entirely upon the condition of the person affected, also the kind of poison deposited. If the sore that first appears is not irritated in any way, it generally appears in a rounded or oval shape. To the touch it feels like a pea under the skin. It is smooth and polished, of a reddish or grayish color, varying in size. There is no pus unless irritated—simply a thin, watery discharge, and very little of that. This excretion does not affect other parts as does chancroid pus. In three cases out of four there will be but one sore.

In case the chancre becomes irritated, the sore has an appearance as though it had been scraped out. The edges will have a hard crust of grayish color; pressing the sore between the fingers will reveal the hard feeling spoken of before. Occasion-

ally a chancre and a chancroid will appear side by side, but the difference will be readily seen ; one will be hard and the other soft.

Gangrenous chancres appear at times. They are muddy, darkish or blackish in appearance. Persons of debilitated condition or intemperate habits are more prone to this condition. Fortunately this form of chancre is quite rare. A chancre once contracted prevents a recurrence ; a person cannot take syphilis a second time.

When a chancre appears first in the urethra (pipe) the sore does not amount to much, as the acid of the urine and the cleaning it gets soon heals it. Here, again, the sore is recognized by the hardness to the touch.

Chancre of the finger is very painful. The inflammation extends to the hand and arm, causing a great amount of swelling. Chancre of the lips is a result of kissing, using table utensils or drinking-cups in public places. There is generally but one chancre. It is oval, and of the usual hardness. The discharge is thin and scanty. The entire lip is painful and stiff. The glands under the jaw and around the ears are swollen. In chancre of the tongue it is usually the tip of that member that is affected. The sore is very hard and indolent.

**Treatment.**—One or two Orthodox tablets three times daily with water. Keep the bowels regular ; if necessary take laxative tablet.

## ACCIDENTS.

In all cases where the patient has been injured by an accident, ascertain at once the nature of the injury. If bleeding occurs this must be stopped before anything else is done.

### BLEEDING.

**Venous Bleeding.**—Bleeding from the veins may be known by the color of the blood, which has a dark red or purple color, and wells out in a *continuous stream* ; it may be stopped by pressing the thumb or finger near or into the wound, until a compress can be obtained, which may be made from a piece of linen or cloth or from a handkerchief folded into a square pad, which must be placed *below* the wound and bandaged tightly.

**Arterial Bleeding.**—The blood from the arteries is of a bright red color, and *spurts out in jets*. It may be stopped by pressure

upon the limb *above* the wound. Make the patient lie down at once unless the head is injured, and if the bleeding occurs from one of the limbs, lift up the wounded part; if the artery can be located, press upon it at once with the fingers until a bandage can be procured, then place any hard substance over the artery and apply a bandage as tightly as possible until the bleeding is controlled. A piece of soft rubber tubing or an elastic suspender is an excellent thing and will stop the bleeding. If the bandage does not arrest the flow of blood thrust a stick under the bandage and twist it until the bleeding is controlled. In case this does not stop the bleeding the artery must be tied; this is accomplished by washing the wound, releasing the pressure, and as soon as the artery can be located seize it with a pair of tweezers, draw it out slightly above the surface of the wound and tie it with a piece of silk. This should be done, however, only as a last resort.

A hard substance placed in the armpit, and the arm strapped tightly to the body, will arrest bleeding from the arm. A ruler, or a large potato, or any like article, placed under the knee and the leg bent back to the thigh and held firmly in position by a stout bandage will arrest bleeding from the leg.

In all cases where bleeding occurs it is necessary to act promptly and with decision. Above all things keep cool, and if possible summon a physician at once, but never neglect to stop the flow of blood as promptly as possible, as delays may result in death.

**Bleeding from the Nose.**—Most cases need no attention save a compress made of paper placed between the upper lip and the gum, this presses upon the blood vessels and stops the bleeding. In more severe cases apply ice or cold applications to the nose and back of the neck. Careful plugging of the nostrils by allowing the blood to form a clot will be necessary in some cases. This is best accomplished by taking a long, narrow strip of cheese cloth or old muslin, which should be pushed carefully into the nostril by means of a penholder or pencil as far as it will go, the balance of the strip should then be pushed in gently but firmly and the end allowed to hang from the nose. If the bleeding continues and finds its way into the mouth, remove the plug and insert it again, packing it more tightly. After several hours the plug may be withdrawn by pulling the end of the strip hanging from the nose, which should be done with the greatest care so as not to

start the bleeding again. If the bandage has dried and adhered to the membrane no force should be used, but it should be loosened with a little warm water or oil.

**Internal Bleeding.**—This may occur from the stomach or the lungs. When from the stomach the blood is of a dark red or black color, and often mixed with food. It is vomited up and is never frothy. The patient should be made to lie down with the head and shoulders slightly raised. Give ice chopped in small pieces, and place a piece of ice wrapped in a cloth over the stomach. Give a half teaspoonful of turpentine in cold milk every two or three hours.

**Bleeding from the Lungs.**—This is caused by the breaking of a blood vessel in the lungs. The blood is bright red and frothy, and is usually accompanied by coughing and a rattling sound in the chest. The patient should be made to lie down with the head and chest slightly raised. Give him chopped ice and a teaspoonful of salt dissolved in a wineglass of water. Apply cold applications to the chest.

## WOUNDS.

**Treatment.**—All kinds of wounds are treated upon the same general principles: Cleaning, closing, and watching for subsequent trouble, as inflammation and reopening of the wound. Most people can sew or know how to use a needle. If they will only close a gaping wound with the same confidence as they do a torn garment the wound will heal so nicely that they will never again hesitate to immediately use the needle and thread in a emergency.

The skin around the wound, if in a hairy part of the body, should be shaved or the hair cut as closely as possible with a pair of scissors. Wash with antiseptic solution made by putting a tablet of Bichloride in a basin of water. Take as many stitches as are necessary to bring the edges of the wound together, usually half an inch apart. When the wound is closed lay on it a piece of soft linen saturated in the Bichloride solution; gently put on a bandage, and nature will do the rest.

Wounds that refuse to heal and are discharging quantities of matter may be poulticed until they become clean; then they are to be daily dressed with an antiseptic. Keep the bowels open with

Calomel Comp. No. 3, or one or two Compound Cathartic tablets taken at night.

If there is fever, give an Aconite Comp. No. 2 tablet every hour for three hours and then one every two hours to keep fever down and put patient into a profuse perspiration.

For undue swelling, wet a cloth with a solution of lead and opium, made by dissolving a Lead and Opium Wash tablet in two tablespoonfuls of water, and lay it on the swollen part.

## BRUISES, CONTUSIONS.

**Definition.**—An injury to the tissues under the skin.

**Cause.**—External violence, blows, falls.

**Symptoms.**—Bruises are of such common occurrence as to need but little description. Pain is felt over the injury, which becomes sharper if the bruise is deep seated, the part swells, and becomes discolored (black and blue).

**Treatment.**—If the bruise is severe apply Lead and Opium Wash, hot on cloths, renewing them as they grow cool. If of a less serious character cold applications may be used.

## FRACTURES.

(BROKEN BONES)

**Definition.**—A fracture is a division of the bone by external violence or muscular contraction. Fractures may be simple or compound. Simple—when the flesh covering the bone is not torn. Compound—where the flesh is torn by the end of the broken bone, which may protrude through the wound.

**Cause.**—External violence, sudden contraction of the muscles. In old age the bones become brittle and break easily. Certain diseases destroy the strength of the bones—as syphilis, scurvy, rickets, gout, and rheumatism.

**Symptoms.**—Fractures may be distinguished by a sudden deformity of the limb; either the limb will be shorter or there will be a protrusion or lump that is not noticeable upon the corresponding part of the body. Motion is interfered with, and in compound fractures great pain exists from the tearing of the flesh. In attempting to move the broken limb a peculiar grating noise,

called *crepitus*, caused by the broken ends of the bones rubbing together may be heard.

Treatment.—In dealing with a fracture, handle the broken part as tenderly as possible, yet let your examination be thorough enough to ascertain the exact injury. If the patient can be treated on the spot, and the fracture is a simple one, the bone should be set at once, otherwise swelling and inflammation will set in and prevent you from doing it ; this is done by gently pulling the broken limb back into shape. One person should hold the broken limb above the injury, and a second should pull gently at the lower part, until the ends of the bones meet in their normal position, when they should be held in place by a bandage or splint. The best form is the plaster paris bandage, which, when dry, acts also as a splint. To make a plaster bandage, mix some plaster of paris with water to the consistency of cream, apply the bandage to the limb, and between each fold put some of the wet plaster, which soon dries, and holds the broken parts in proper position. Care must be used not to apply bandage so tightly as to interfere with the circulation ; should this be done by mistake, cut the entire bandage down the centre and restrap it by an outside bandage. If no plaster is at hand, a splint may be made out of a thin piece of board, leather, felt, or thick pasteboard ; these may be moulded to the proper shape by soaking in hot water until they become pliable. It is a good plan to carry a variety of felt splints, as they can be easily adjusted, and form a light, strong and durable support. Before applying them they should be put in hot water and moulded to the parts ; when dry they retain their shape.

In case of a compound fracture, if the bone protrudes, it must be put back, which can be usually accomplished by gentle pulling, as in simple fractures. If the flesh has contracted about the bone so that the latter cannot be drawn back, the wound may have to be enlarged with a lancet. After the bone has been put in proper place, wash the wound with solution of carbolic acid (a teaspoonful well stirred into a pint of water), cover with a piece of bichloride gauze, and apply a plaster bandage or splint. If plaster bandage, cut out a space over the wound so that it can be looked after if necessary. If splints are used there should be one on either side of the limb. After the wound has been dressed the patient should be allowed to rest so as not to disturb the broken limb.



Injury to bone heals in the same manner as those of the flesh. The closer the parts are put together the more quickly they unite. The first stage is from the first to eighth day, when nature is engaged in repairing the injury ; absorption of the swelling and exudations occur, the healing process goes on quietly and surely, the bone commences to form about the eighteenth day, provided no suppuration or fever ensues.

Where the patient cannot be attended on the spot, and the injury is such that he must be carried, place him upon a wide board, a door or stretcher, so that he can lie at length without movement of the limbs.

Bags filled with sand are useful to steady a part by laying them alongside of the broken member.

**BANDAGES.**—In the use of bandages, either to support the limb or to put on the outside of the first dressing, great care must be taken not to have them too light nor too loose. Great injury is done by being too tight. Commence the bandage always at the toes, if the leg is injured ; at the fingers, if the arm, and wind it as uniformly as possible so there will be equal pressure on all sides.

If you pinch the nails of the finger or toe, that will drive the blood from the tissues underneath, and the part will become blanched and white ; if, on removing the pressure, the color returns instantly, you may feel certain that the circulation is all right.

The fracture having been dressed, give light nourishing diet for a few days. The bowels need not be disturbed for three or four days. If necessary, give a laxative.

If fever rises to give alarm, give tablet Aconite Comp. No. 2 every hour until the temperature falls. For pain give Morphine Comp. No. 4 tablet. If great swelling occurs the dressing may be removed in the first twenty-four hours, but it does harm to remove the dressing too often. If the patient passes the first week nicely he will do well after that.

In fracture of the arm the patient is able to be about very soon, carrying it in a sling, but with the leg or thigh it is very different. He is obliged to remain in a recumbent position for a long time. Where, by long continued quiet, the patient's limb becomes stiff, due to want of movement of the muscles, as soon as the bone has united the patient should commence to move the joints, gently at first, and gradually increase the force. The time to

start the movement is at the end of the third week, once a day, or every other day. The patient should be assisted by some one. The parts are made more pliable by the use of warm water douches. After gentle massage, rub the parts with a liniment, always using care not to put too much strain on the limb at first.

## DISLOCATIONS.

**Definition.**—Dislocations are caused by the end of a bone becoming displaced, by slipping out of socket or “out of joint,” as it is commonly called. They may be known by the changed shape or deformity of the joint, as compared with its fellow on the other side of the body. The limb is longer or shorter, is fixed in one position, and cannot be moved by the patient; pain is felt at the joint, with numbness in the part affected.

**Cause.**—Sudden wrench or twist sufficient to stretch or tear the ligament and allow the bone to slip out of place.

**Treatment.**—The same general plan may be adopted for the treatment of all dislocations, and consists in prompt extension of the dislocated part into the proper position, so that the muscles may have a chance to draw it back into its place.

The suspected part should be carefully examined in order to determine whether a dislocation has occurred or the limb has been fractured. In all cases of broken bones there is a peculiar grating sound (called *crepitus*), when the limb is moved, caused by the ragged ends of the broken bones grating together, which is absent in dislocations.

Dislocations may occur at any of the joints, but only the more important ones will be described.

**THE JAW.**—Dislocation of the lower jaw occurs from opening the mouth too wide while yawning or laughing. The jaws cannot be closed and the patient remains with mouth wide open, the saliva dropping from its corners, and without the power of distinct speech. Grasp the lower jaw with the hands, the fingers under the chin, and the thumbs inserted well back into the mouth and resting on the lower teeth, then press downwards with the thumbs on the jaw as much as possible, and at the same time draw the chin forward with the fingers. This will bring the lower jaw downward and forward, and allow the muscles to draw it back into its place. The thumbs must then be quickly withdrawn, and

as an additional precaution they should be protected by wrapping them in a handkerchief or a pad of soft cloth, as otherwise they are liable to be badly bitten.

**THE SHOULDER.**—Dislocation here may be known by the altered shape of the joint, the shoulder is depressed and flat, and the end of the arm bone will be found in some unusual position, most probably in the armpit. The injured arm is somewhat longer than the normal one, and cannot be raised or extended by the patient.

There are many ways of treating this injury. The simplest is for the patient and operator to place themselves side by side upon the floor facing in opposite directions, the former lying on his back and the latter sitting alongside of him. Then the operator having removed his shoe places his heel in the patient's armpit, and grasping the dislocated arm with both hands pulls it toward him, steadily and strongly, at the same time pushing against the head of the bone with his heel so as to force it into its proper place. This produces a leverage and brings the bone in such a position that the muscles can draw it back into its socket. Another method is to put the person in a chair, then pass a large towel or tablecloth around the chest close up under the armpit of the affected side, draw the two ends up toward the opposite shoulder, cross them and have them held by an assistant or attach them to some fixed point, the arm is then to be pulled firmly and steadily until it assumes the proper position for the muscles to draw it into place.

**ELBOW.**—The arm is bent and cannot be straightened; the elbow is abnormally pointed, due to the bones sticking out at the back part of the joint.

Place the patient on a chair; let one person grasp the arm above the elbow, a second take hold of the wrist, and each pull against the other, carefully, but firmly and steadily. A third person should then grasp the elbow with his two hands and press the dislocated bones downward and forward. As the swelling becomes reduced the arm should be suddenly bent without the patient's knowledge, and the bones will assume their proper positions. The arm should then be bent and carried in a sling for several days.

**THIGH.**—In dislocation of the thigh the leg appears to be considerably shorter; the foot is turned inwards, the patient cannot

move the limb, and any attempt to turn the foot outward causes great pain.

Lay the patient on his back, pass a sheet or strong towel around the leg well up into the crotch and fasten the ends to a pulley or staple, then grasp the ankle with both hands and pull the leg toward you so as to extend the muscles. If assistance is required pass a towel around the thigh and let the ends be grasped by two or more persons, and while the extension is being made push the head of the bone outward until it enters the socket. If the dislocation is outward lay the person on his face and during the extension push the head of the bone inward.

**KNEE JOINT.**—Extension is to be made upwards from the thigh and downwards by the leg, and the dislocated bone replaced by pressure of the hand.

**ANKLE.**—Let one person grasp the leg above the thigh and a second the foot by the heel and toe and pull carefully and steadily against each other, and as soon as sufficient extension has been made, a third person should press downward on the bone.

Dislocation of the fingers or wrist are treated in the same general manner, which consists in pulling or extending the muscles so that the bones are brought into such a position that the muscles are able to draw them back into their proper places. In dislocation of the fingers it is necessary to put a clove hitch on the dislocated bone in order to get sufficient traction.

## SYNOVITIS.

**Definition.**—An inflammation of the synovial membrane of the joints.

**Cause.**—Injury to joints caused by sudden blow or wrench.

**Symptoms.**—Inflammation and stiffness, with a puffy swelling around the joints caused by escape of the synovial fluid, or joint oil, into the surrounding tissues.

The knee and ankle are the joints more liable to be injured, patient is unable to straighten leg if the knee joint is affected, and walking is accomplished with great difficulty, and accompanied with severe pain. In severe cases constitutional disturbances, such as fever, disordered digestion, and loss of sleep are present, and, if the case is not properly attended to, pus may form, causing thickened membranes and permanent stiffness of the affected part.

Synovitis also results from exposure to cold in rheumatic and syphilitic patients. The onset here is sudden, the patient arising from bed to find one of his joints stiff and painful.

**Treatment.**—Patient must be made to rest, with the leg elevated. Apply cloths wet with the Lead and Opium Wash until the inflammation subsides, then paint the joint with Tincture Iodine. Keep the bowels open with a Compound Cathartic tablet. If the joint is much swollen, and much inflammation exists, and pus is present, a surgeon should be called, but, if not accessible, open the swelling by means of a clean needle or lancet. If fever exists give an Aconite Compound No. 2 tablet every two or three hours until the fever subsides.

## FAINTING.

A sudden loss of consciousness caused by hemorrhage, fatigue, fright, or weakness following a severe illness; due to feeble circulation of the blood in the brain.

The patient should be laid down, with the head, if possible, lower than the feet. All tight clothing must be loosened, give him plenty of air, and sprinkle the face with cold water. Let the patient inhale ammonia, and as soon as he is able to swallow, give him a teaspoonful of Aromatic Spirits of Ammonia in a wineglass of water, or a cup of hot coffee, or glass of wine. If the fainting follows an accident and bleeding occurs, no stimulant should be given until the hemorrhage is controlled.

## HEAT PROSTRATION.

(SUNSTROKE—HEATSTROKE)

**Definition.**—Exhausted condition of the vital powers, due to direct exposure to the sun, or the effects of extreme heat.

**Cause.**—Excessive heat, improper ventilation with high temperature. Direct exposure to the sun. More liable to occur after great bodily fatigue, or the excessive use of stimulants in hot weather.

**Symptoms.**—There are two varieties of heat prostration. In true sunstroke the symptoms develop rapidly. The patient suddenly becomes unconscious and falls, the breathing is rapid or labored and noisy, the skin hot and dry, the pulse rapid, the



eyes bloodshot with the pupils contracted. The temperature rises to 105°-108° F., and unless controlled by application of cold, death results.

**Treatment.**—Place the patient on his back, with head slightly raised, in the coolest spot at hand. Remove his clothing and pour cold water first over his head, then over his chest, and finally over his extremities. If ice can be obtained and a bath tub is handy, place the patient at once in the tub, fill with cold water, add the ice and rub the surface of the body with a piece of ice. Continue this treatment until the temperature begins to fall or the patient regains consciousness, when he should be removed and put to bed. If the temperature rises again, a second bath should be given. Open the bowels by a dose of Castor Oil as soon as the patient can swallow. Keep him quiet, and after he recovers from the attack put him on Iron Quinine tablets No. 2 until he recovers his strength.

#### (HEAT PROSTRATION)

**Symptoms.**—The patient grows faint, with feeling of weakness, the pulse is rapid and feeble *but no fever*, the skin cool, the face pale and anxious, with partial or complete unconsciousness.

**Treatment.**—Let the patient lie down with the head low and give a teaspoonful of Arom. Spirits of Ammonia, or a small dose of brandy and water, or whisky. If the patient cannot swallow, apply Spirits of Ammonia to the nostrils, and as soon as consciousness returns give the stimulants as directed above.

## CHOKING OR SUFFOCATION.

CHOKING is caused by the presence of some foreign body in the throat. This may be removed, if not lodged too tightly, by holding the person's chest against a table and giving two or three smart blows upon the back. If this does not remove it introduce the forefinger and thumb into the throat as far back as possible, and endeavor to reach the obstruction. Even if this is unsuccessful it may cause vomiting, which may expel the object. Turning the person head downwards and slapping the back will sometimes accomplish the purpose. If none of these means succeed, a hook may be made of a fine wire which is to be cautiously lowered into the throat; this, however, should not be done until all other



means have failed, or there is positive danger of the patient choking to death, for unless very skillfully performed serious damage may be caused by the wire lacerating the throat.

**SUFFOCATION.**—Due to breathing foul air or poisonous gases. This may occur on shipboard, in places such as the hold, where an accumulation of foul air exists due to lack of proper ventilation.

**Treatment.**—Bring the patient into the fresh air as soon as possible ; if he has lost consciousness loosen all tight clothing, and dash cold water on the face and chest. Apply snuff or ammonia to the nostrils. If the patient does not revive lay him on his back, with a roll of clothing or pillow under his shoulders, so that the head will hang slightly downward and backward ; then, kneeling at the patient's head, grasp the arms just above the wrists and draw them slowly up over his head and hold them there for four seconds, then push them down, bending the elbows, and press them gently yet firmly against the chest for four seconds. Continue this treatment until patient shows sign of recovery. The movements must be persevered in for an hour or more if necessary, the operator being relieved as he becomes tired and a fresh one taking his place. As soon as the patient begins to revive, which is seen by a change in the color of the face, and a slight effort at breathing, rub the limbs toward the body, administer a light stimulant, and as soon as the breathing becomes normal put him in a warm bed.

## DROWNING.

As soon as possible turn the patient on his face with the head down so as to allow the water to run out of the mouth, cleanse the mouth and nostrils with a handkerchief, then lay him on his back with the head and shoulders supported on a roll of clothing or on a cushion a little higher than the body. Draw the tongue out and secure by means of a handkerchief or bandage tied around the lower jaw, but not so as to obstruct breathing. This allows the free passage of air into the lungs and prevents the tongue from slipping backwards and closing the windpipe. Remove all tight clothing above the neck and chest, cutting it so as to gain time ; then, kneeling at the patient's head, grasp the arms just above the wrists and draw them slowly up over his head and hold them there for four seconds, then push them down, bending the elbows,

and press them gently yet firmly against the chest for four seconds. Continue this treatment until patient shows sign of recovery. The movements must be persevered in for an hour or more if necessary, the operator being relieved as he becomes tired and a fresh one taking his place. The above treatment causes an alternate expansion and contraction of the lungs and is intended to imitate the act of breathing. It is called artificial respiration and helps to sustain life by supplying fresh air to the lungs until the vital powers are sufficiently stimulated to resume their normal functions. As soon as the patient begins to revive, which is seen by a change in the color of the face, and a slight effort at breathing, rub the limbs toward the body, administer a light stimulant, and as the breathing becomes normal put him in a warm bed, apply hot bottles to the feet, and wrap hot flannels about his chest.

## FROSTBITE, CHILBLAINS.

Frostbite, or freezing of the limbs or exposed parts of the body, is liable to occur during severe cold weather. The best treatment is application of cold, either ice or snow, rubbing the part well so as to restore circulation. After the blanched or white color has disappeared the part may be wrapped in warm flannel, and treated like a burn. On no account bring the patient near a fire, or into a warm room, as mortification is apt to occur, and the part have to be amputated.

Chilblains are caused by too rapid warming of the feet after exposure to cold. Persons with poor circulation, who have a habit of warming their feet after coming out of the cold, are liable to chronic attacks of chilblains. Bathing the feet with alcohol, or alum and water, will usually give relief.

## BURNS, SCALDS.

Burns may be caused by contact with chemicals, fire, or hot water. They may be slight, so as to cause simple redness of skin, or the parts may be blistered, or in more severe cases actual charring may occur.

Pain from a burn is always very intense, and is increased by

contact with the air. In simple burns, Bicarbonate of Soda, or flour dusted thickly over the part, removes the smarting and pain. This may then be covered by a linen cloth, and over this some cotton batting so as to protect the part from injury.

A mixture of Linseed Oil and Lime Water in equal parts (Carron Oil) is to be applied in more serious burns, linen rags should be dipped in this, and the whole covered with a dry bandage. After the pain has passed away, and the burns commence to heal, use a Carbolic Acid Ointment made by mixing thirty drops of carbolic acid to an ounce of vaseline. In treating burns, the dressings should be changed as seldom as possible, but often enough to keep them clean. If blisters form they should be pricked so as to allow the fluid to escape, but the skin must not be unnecessarily broken or cut.

## LIST OF REMEDIES

CONTAINED IN

## NELSON'S MEDICINE CHEST

WITH DIRECTIONS

AND REFERENCES FOR THEIR USE

The medicines described in this book, and furnished with NELSON'S MEDICINE CHEST, are made by the FRASER TABLET COMPANY. They can be depended on for reliability, accuracy of dose, and uniformity of action. They are convenient, portable, occupy little space, and do not deteriorate by keeping. They offer many advantages over liquid preparations. Extra supplies can be obtained at all times from the Fraser Tablet Company, 262, Fifth Avenue, N. Y., or from their agents.

ACONITE COMP. NO. 2—*Remedy for Fever.*

Tr. Aconite .....	1 min.
Tr. Belladonna .....	2 min.
Tr. Bryonia.....	2 min.

One every hour for three to six doses, then every two or three hours until the fever is controlled. (See pages 6, 11, 12, 16, 17, 38, 47, 49, 53.)

AMYL NITRITE—*Remedy for Asthma.*

Crush a pearl in handkerchief and inhale the vapor. (See page 17.)

ANTIASTHMATIC—*Remedy for Asthma.*

Potass. Iodide .....	2 gr.
Potass. Bromide.....	2 gr.
Fl. Ext. Euphor. Pil. ....	3 min.
Tinct. Lobelia .....	2 min.
Nitroglycerin.....	1-200 gr.

One tablet every three or four hours for the relief of asthma, short breath and feeling of suffocation. (See page 17.)

### ANTICONSTIPATION NO. 5—*Laxative in Inflamed Conditions of the Bowels.*

Sulphur .....	2 1-2 gr.
Cream Tartar .....	1-2 gr.
Tr. Hydrastis Can.....	1 min.
F. E. Cascara Sag.....	5 min.

One or two at night; increase or diminish the dose as the occasion requires. (See pages 26, 27.)

### ANTIDYSPEPTIC NO. 2—*Remedy for Indigestion.*

Strych. Sulph .....	1-60 gr.
Ipecac Powder .....	1-10 gr.
Capsicum Powder.....	1-4 gr.
Ext. Rhubarb .....	1-4 gr.
Ext. Gentian .....	1-2 gr.
Sodium Bicarb.....	2 gr.

One tablet before meals with water, and one two hours afterwards if required. (See page 18.)

### ANTISEPTIC PASTILES—*Remedy for Cold in the Head, Sore Mouth or Throat.*

Dissolve one in two ounces of water and use freely with atomizer, or as a mouth wash or gargle. (See pages 8, 11, 39.)

### ANTISEPTIC TABLETS (POISON)—*For Preparing Bichloride Solution.*

Corrosive Sublimate.....	7 3-10 gr.
Ammon. Muriate .....	7 7-10 gr.

Dissolve one tablet in a pint of water and use as an antiseptic dressing for wounds, and also as a disinfectant. Must not be used internally. (See pages 8, 9, 13, 22.)

### AROMATIC SPIRITS AMMONIA—*Remedy for Faintness, Heat Prostration, Drowning, Sudden Weakness, Weak Heart.*

One teaspoonful in a wineglass of water repeated in half an hour if needed. (See pages 53, 54.)

### BETA NAPHTOL COMP.—*Remedy for Flatulence, Gas in Bowels, Fermentation of Food.*

Beta Naphtol.....	1 gr.
Bismuth Salicylate.....	1 gr.
Arom. Chalk Powder .....	1 gr.

One tablet with water at meal-time, or two hours after. (See pages 8, 20, 22, 26, 27.)

**BISMUTH SUBGALLATE COMP. NO. 2**—*Remedy for Intestinal Indigestion, Farinaceous Dyspepsia.*

Bism. Subgall.....	3 1-2 gr.
Ext. Pancreatis.....	1 1-2 gr.
Ext. Nux Vomica.....	1-4 gr.

One tablet immediately after meals ; repeat in two hours if not relieved. (See pages 20, 26.)

**BLACKWASH (POISON)**—*Remedy for Chancroid.*

Add two tablets to a half pint of water and apply on soft linen or lint. Shake before using. Not to be taken. (See page 43.)

**BLAUD'S PILL COMP. NO. 4**—*Blood Tonic. Alterative.*

Blaud's Mass.....	5 gr.
Corros. Sublim.....	1-80 gr.
Strychnine Sulph.....	1-60 gr.
Acid Arsenous.....	1-50 gr.

One tablet after meals. (See pages 7, 13, 27, 31, 35.)

**CALCIUM SULPHIDE, 1-2 GR.**—*Remedy for Boils, Pimples, Eruptions on the Skin.*

One tablet after meals. (See page 38.)

**CALOMEL COMP. NO. 3**—*Remedy for Torpid Liver.*

Calomel.....	1-10 gr.
Sodium Bicarb.....	1 gr.

One tablet every hour for ten doses, or until they operate. (See pages 18, 19, 47.)

**CALOMEL, 1-20 GR.**—*Remedy for Disordered Secretions.*

One or two every hour until bowels move. In Typhoid Fever, one every two hours for three days. (See page 8.)

**CALOMEL, 1-4 GR.**—*Remedy for Disordered Secretions.*

One every hour until bowels move, followed by a cathartic. (See page 5.)

**CALOMEL, 5 GRS.**—*Remedy in Yellow Fever.*

Four tablets at a dose. (See page 10.)

**CALOMEL AND IPECAC**—*Remedy for Intermittent Fever.*

Calomel.....	1-4 gr.
Ipecac.....	1-4 gr.

One every two hours, for three doses. (See page 7.)

**CARBOLIC ACID (POISON)**—*Remedy for Wounds, Bruises, Sores. Disinfectant.* (See pages 13, 22, 27, 29, 38.)



CARBOLATED VASELINE—*Remedy for Burns, Piles, Sores.*

(See pages 11, 27, 39.)

CARDIAC ASTHMA—*Remedy for Asthma with Complication of Heart Disease.*

Heroin .....	1-24 gr.
Strych. Sulphate .....	1-48 gr.
F. E. Digitalis .....	1 min.

One or two tablets every two or three hours. (See page 17.)

CARRON OIL—*Remedy for Burns.*

Apply on soft linen or lint and cover with cotton, keep in place by a loose soft bandage. (See page 57.)

CASCARA COMP. NO. 3—*Remedy for Constipation, Torpid Liver, Clogged Secretions.*

Cascarin .....	1-4 gr.
Aloin .....	1-4 gr.
Podophyllin .....	1-6 gr.
Ext. Belladonna .....	1-8 gr.
Strych. Sulph. ....	1-60 gr.
Gingerine .....	1-8 gr.

One or two at night, followed by one next morning if needed. Reduce dose or lengthen interval as the bowels resume their normal functions. (See pages 9, 13, 18, 24, 31, 35, 38, 40.)

CASTOR OIL—*Remedy for Disordered Bowels.*

One or two tablespoonfuls, as required. (See pages 7, 10, 19, 20, 28, 29, 54.)

CATHARTIC COMP. U. S. P.—*Remedy for Constipation. An Active Cathartic.*

Ext. Colocy. Co. ....	1-4 gr.
Calomel .....	1 gr.
Ext. Jalap .....	1-2 gr.
Gamboge Powder .....	1-4 gr.

One or more at night as occasion requires. (See pages 16, 19, 47, 53.)

CHLORODYNE—*Remedy for Pain, and Diarrhœa.*

Morphine Mur. ....	1-6 gr.
Ext. Cannabis Ind. ....	1-4 gr.
Nitroglycerin .....	1-300 gr.
Ext. Hyoscyamus .....	1-2 gr.
Oleoresin Capsicum .....	1-10 gr.
Oil Peppermint .....	1-10 min.

One tablet every hour for three doses, unless earlier relieved. (See pages 19, 21.)

CHLORODYNE NO. 2—*Remedy for Pain.*

Morphine Mur.....	1-12 gr.
Ext. Cannabis Ind.....	1-8 gr.
Nitroglycerin.....	1-600 gr.
Ext. Hyoscyamus.....	1-4 gr.
Oleoresin Capsic.....	1-20 gr.
Oil Peppermint.....	1-20 min.

One tablet every two hours until relieved. (See page 20.)

COUGH PERSISTENT WITH HEROIN—*Remedy for Coughs.*

Ammonium Muriate.....	2 gr.
Ipecac Powd.....	1-4 gr.
Ext. Squill Acet.....	1-4 gr.
Fld. Ext. Senega.....	1 min.
Heroin.....	1-25 gr.

One tablet every two or three hours. (See pages 15, 16, 17.)

COPPERAS SOLUTION—*Disinfectant.*

Water.....	1 gal.
Iron Sulphate (Copperas).....	1 lb.

A safe and harmless application. (See pages 14, 24.)

CORROSIVE SUBLIMATE, 1-60 GR.—*Remedy for Diarrhœa and Dysentery.*

One tablet every hour or two until the character of the discharges change. (See pages 20, 21, 22.)

CORYZA—*Remedy for Sudden Colds, Cold in the Head.*

Quinine Sulph.....	1-2 gr.
Ammon. Mur.....	1-2 gr.
Camphor.....	1-2 gr.
Opium Powder.....	1-10 gr.
Ext. Belladonna.....	1-10 gr.
Ext. Aconite.....	1-10 gr.

Two at first dose, followed by one every hour until cold is broken up. (See page 15.)

CREAM TARTAR COMP.—*Remedy for Beri Beri.*

Cream Tartar.....	7 1-2 gr.
Potass. Nitrate.....	7 1-2 gr.

One tablet with water every two hours. (See page 13.)

DIARRHŒA FERMENTATIVE—*Remedy for Diarrhœa.*

Bismuth Subgall.....	1 gr.
Salol.....	1 gr.
Cerium Oxalate.....	1 gr.
Dover's Powder.....	2 gr.
Oil Anise.....	1-10 min.

One or two every two or three hours until relieved. (See page 20.)

DOVER'S POWDER, 5 GRS.—*Remedy for Cold.*

One or two tablets with five grains of Quinine, taken at bedtime. (See pages 15, 22.)

EPSOM SALT—*Remedy for Disordered Bowels.*

A teaspoonful to a tablespoonful in water, as required. (See pages 6, 19, 28, 29, 36.)

HEART STIMULANT—*Remedy for Weak Heart, Palpitation, Excessive Smoking.*

Tr. Digitalis .....	2 min.
Tr. Strophanthus.....	2 min.
Tr. Belladonna .....	1-4 min.
Nitroglycerin.....	1-100 gr.

One tablet three or four times a day until relieved. (See page 33.)

INTESTINAL ANTISEPTIC NO. 2—*Remedy for Diarrhœa, due to Fermentation of Food in Bowels.*

Bismuth Subgall. ....	2 gr.
Zinc Sulphocarb.....	1-2 gr.
Beta Naphtol.....	1-2 gr.
Copper Arsen.....	1-200 gr.
Oil Cinnamon.....	q. s.

One tablet with water every three or four hours. (See page 20.)

IRON, QUININE AND STRYCHNINE NO. 2—*Tonic.*

Iron Reduced.....	1 gr.
Quinine Sulph. ....	1 gr.
Strychnine Sulph.....	1-60 gr.

One tablet after meals. (See pages 11, 33, 34, 37, 38, 54.)

LEAD AND OPIUM WASH (POISON)—*Remedy for Bruises, Inflammation, Erysipelas.*

Lead Acetate.....	5 gr.
Ext. Opium.....	1-4 gr.
Ammon. Chlor.....	4 gr.

Dissolve eight tablets in a pint of water and apply on lint or soft linen. (See pages 38, 39, 40, 47, 53.)

LINIMENT TABLET—*Application for Muscular Pains.*

One tablet dissolved in one-half pint of alcohol and applied by rubbing. Not to be taken. (See pages 30, 31, 50.)

MORPHINE COMP. NO. 4—*Remedy for Pain.*

Morph. Sulph.....	1-4 gr.
Atropine Sulph.....	1-150 gr.

See pages 17, 23, 25, 26, 47, 49, 53.)

NITROGLYCERIN, 1-100 GR.—*Remedy for Heart Failure, Neuralgia of the Heart (Angina).*

One tablet every two hours until relieved. (See page 33.)

NEURALGIA, One-half Strength (Brown-Sequard)—*Remedy for Neuralgia.*

Ext. Hyoscyamus.....	1-3 gr.
Ext. Conium.....	1-3 gr.
Ext. Ignatia.....	1-4 gr.
Ext. Opium.....	1-4 gr.
Ext. Aconite.....	1-6 gr.
Ext. Cannab. Ind. ....	1-8 gr.
Ext. Stramonium .....	1-10 gr.
Ext. Belladonna.....	1-12 gr.

One tablet every three or four hours. (See page 32.)

ORTHODOX—*Remedy for Impoverished Blood, Venereal Diseases.*

Potass. Iodide .....	2 gr.
Syr. Ferri Iod.....	5 min.
Mercury Bichlor. ....	1-64 gr.
Donovan's Sol. ....	2 min.
Tr. Nux Vom.....	2 min.

One or two tablets after meals, with water. (See pages 38, 43, 44.)

POTASS. PERMANGANATE, 1 GR.—*Injection for Gonorrhœa.*

One tablet dissolved in four ounces of water and used with a syringe three times a day. (See page 42.)

POTASS. ARSENITIS, 1-50 GR.—*Remedy for Chorea and Diabetes.*

One tablet with water three times a day, increasing by one tablet night and morning until the symptoms are controlled. (See pages 34, 37.)

QUININE SULPHATE—*Remedy for Cold and Fever.*

(For special directions see pages 7, 9, 10, 15, 17, 31.)

QUININE AND CAPSICUM—*Remedy for Malarial Fever.*

Quinine Sulph. ....	2 gr.
Capsicum Powd. ....	1-4 gr.

One or two every two or three hours. (See page 7.)

RHEUMATISM—*Remedy for Rheumatism.*

Sodium Salicylate.....	5 gr.
Colchicin.....	1-120 gr.
Codeine Sulph. ....	1-16 gr.

One or two tablets every three or four hours until the bowels operate freely, then every four hours until relieved. (See page 30.)

ROCHELLE SALT—*Remedy for Disordered Bowels.*

A teaspoonful to a tablespoonful in water. (See pages 6, 19.)

SALOL AND COPAIBA CO.—*Remedy for Gonorrhœa.*

Salol .....	2 gr.
Balsam Copaiba .....	2 gr.
Oleoresin Cubebs .....	1 gr.
Pepsin Pure .....	1-2 gr.
Ext. Kava Kava .....	1 gr.
Oil Sandalwood .....	1-4 min.
Oil Wintergreen .....	1-4 min.

One or two tablets after meals. (See page 41.)

SALOL AND PHENACETINE—*Remedy for Muscular Pains.*

Salol .....	2 1-2 gr.
Phenacetine .....	2 1-2 gr.

One every four hours as directed. (See pages 15, 31, 32.)

SANTONIN AND CALOMEL NO. 2—*Remedy for Worms.*

Santonin .....	1 gr.
Calomel .....	1 gr.

One or two tablets at night; followed by a laxative in the morning. (See page 28.)

SCIATICA—*Remedy for Sciatica.*

Tr. Aconite .....	3-4 min.
Tr. Belladonna .....	3-4 min.
Tr. Colchicum .....	3-4 min.
Tr. Cimicifuga .....	3-4 min.

Two tablets every three or four hours. (See page 32.)

SEDATIVE—*Remedy for Nervous Excitement.*

Sodium Brom. ....	2 1-2 gr.
Potass. Brom. ....	2 1-2 gr.
Ammon. Brom. ....	2 1-2 gr.
Tr. Hyoscyamus .....	5 min.
Tr. Cannabis Ind. ....	5 min.

One tablet with water after meals and at bedtime. (See pages 35, 36.)

SODIUM SALICYLATE, 5 GR.—*Remedy for Rheumatism.*

One or two tablets after meals and at bedtime. (See pages 31, 34.)

TINCT. IODINE—*External Application.*

(See pages 42, 53.)

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Intestinal Obstruction .....	22	Stricture .....	41
Jail Fever .....	9	Suffocation .....	54
Jaundice .....	23	Sunstroke .....	53
Joints, Injury to .....	53	Swamp Fever .....	6
Lead Colic .....	19	Swollen Face .....	39
Lobular Pneumonia .....	16	Synovitis .....	52
Lumbago .....	31	Syphilis .....	43
Lumbo-Abdominal Neuralgia .....	32	Tapeworm .....	29
Lung Fever .....	16	The Rose .....	37
Malarial Fever .....	6	Typhoid Fever .....	7
Measles .....	12	Typhus Fever .....	9
Mediterranean Fever .....	9	WORMS :	
Muscular Rheumatism .....	30	Round .....	28
Nasal Catarrh .....	14	Tape .....	29
NEURALGIA :		Thread .....	28
Intercostal .....	31	Wounds .....	46
Lumbo-Abdominal .....	32	Venereal Diseases .....	40
Of the Heart .....	32	VEINS :	
Paralytic Stroke .....	35	Enlarged .....	40
Plaster of Paris Bandages .....	48	Varicose .....	40
		Yellow Fever .....	9

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